

TASTE of CARROLL

The Culinary Event Supporting
BridgingLife Hospice & Palliative Care

Monday, April 27, 2026 at Stratosphere Social

Sponsorship Benefits	Sommelier \$15,000	Epicurean \$10,000	Bon Appétit \$7,500	Amuse Bouche \$6,500	Entrée \$5,000	Hors d'oeuvres \$3,000	Champagne \$2,500	Intermezzo \$2,000	Dessert \$1,500	Infusion \$1,000	Tapas \$750
Listed on tasteofcarroll.org and event digital screens											
Top Shelf Cocktail experience, unlimited gaming, pre-event access to silent auction											
Tickets to Exclusive Sponsor Reception 5 – 6 pm. Preview 15+ culinary partners	12	11	10	9	8	7	6	5	4	3	2
Parking at Kohls with shuttle service											
Additional Sponsor Event tickets when gift is received by February 15	4	4	3	3	2	2	1	1	1		
Reserved Table Seating											
On Site Parking Permits for sponsor and guests											
Logo included on digital silent auction platform											
Logo included on Print invitations (if commitment received by February 1)											
Recognition in social media, print and marketing materials promoting Taste of Carroll (frequency based on dates of commitment)											



Presenting Sponsor



tasteofcarroll.org
facebook.com/bridginglife

For more information, contact event manager Heather Akers at:
BridgingLifeDevelopment@lifebridgehealth.org or call 410-871-7220.

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Sponsor Confirmation Form

Yes, I would like to support BridgingLife by sponsoring Taste of Carroll at the following level:

- | | | | |
|---|--|--|--|
| <input type="checkbox"/> Sommelier: \$15,000 | <input type="checkbox"/> Amuse Bouche: \$6,500 | <input type="checkbox"/> Champagne: \$2,500 | <input type="checkbox"/> Infusion: \$1,000 |
| <input type="checkbox"/> Epicurean: \$10,000 | <input type="checkbox"/> Entrée: \$5,000 | <input type="checkbox"/> Intermezzo: \$2,000 | <input type="checkbox"/> Tapas: \$750 |
| <input type="checkbox"/> Bon Appétit: \$7,500 | <input type="checkbox"/> Hors d'oeuvres: \$3,000 | <input type="checkbox"/> Dessert: \$1,500 | |

Yes, I would like to add an additional amount as an Outright Gift (100% Deductible):

- | | | |
|---|---|--|
| <input type="checkbox"/> Additional \$1,000 | <input type="checkbox"/> Additional \$200 | <input type="checkbox"/> Additional \$50 |
| <input type="checkbox"/> Additional \$500 | <input type="checkbox"/> Additional \$100 | <input type="checkbox"/> Other: \$ _____ |

Company Name: _____

Contact Name: _____

How would your name to appear as a sponsor?: _____

Address: _____

Phone: _____ Fax: _____

Email Address: _____

To sponsor, please complete the above form. Deadline for marketing inclusion April 1 unless otherwise noted.

Tax ID: 52-1565870

**Check payable to: Bridging Life
Mail to: Bridging Life Development Office**

Taste of Carroll

Attention: Heather Akers
200 Memorial Avenue
Westminster, MD 21157

Phone: 410-871-6200 Fax: 410-871-6210
BridgingLifeDevelopment@lifebridgehealth.org

Pay by credit card by visiting tasteofcarroll.org



Presenting Sponsor

M&T Bank

Thank you for your support!