



Celebrating our Sweet 16

Friday, September 13, 2024
at The Carolina Club
150 Stadium Dr. Chapel Hill, NC
secufamilyhouse.org/TheGala

This elegant gala will bring together the community's leaders for our annual fundraiser in support of SECU Family House at UNC Hospitals. Funds raised will support guests of Family House who travel great distances for life-saving medical care at UNC Hospitals. As we celebrate 16 years of serving the great people of North Carolina, this year's Gala will take place back in Chapel Hill at The Carolina Club.

Guests will enjoy a cocktail reception, silent and live auction, seated dinner, brief program, music and dancing.

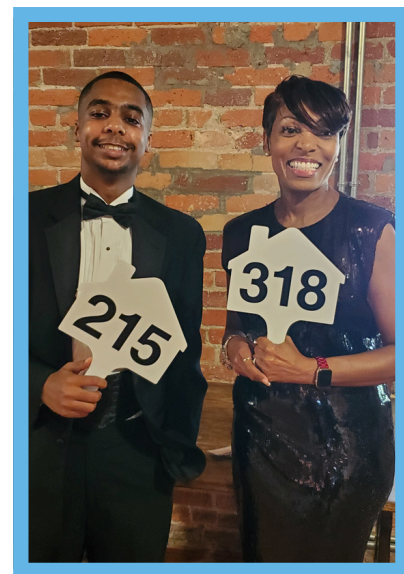
WHY SUPPORT THE GALA

Family House provides a safe, nurturing, affordable home for patients and their loved ones who travel great distances to UNC Hospitals for life-saving procedures and serious illnesses.

Your support of The Gala will help us provide the comforts and necessities of home for our guests, and ensures each guest who walks through the doors of Family House feels safe, welcomed, and comforted.

AUCTION DONOR BENEFITS

- Brand exposure to 300+ guests attending The Gala
- Night of event promotion on auction signage
- Table space in the main hall for display of donated item and package description
- Family House is a 501(c)3. Your donation is tax deductible to the full extent allowed by IRS regulations.



For more information: www.secufamilyhouse.org/gala

Questions? Contact Lee Ann Thomas at leeann@secufamilyhouse.org or 919.932.8005.

DONATED ITEM INTAKE FORM - GALA 2024

Name of Item Donated: _____

Estimated Value of Item \$ _____

Item Description - *This information will be used in any materials we produce describing auction items.*

Terms for redeeming item or service (if applicable) – could include expiration or blackout dates, or any exclusions or restrictions.

How should the winner claim his/her item or service from you? (If applicable)

Any other information to note on this item/service?

Donor Information – *we will use this information to credit your donation and send you a tax receipt/gift acknowledgment*

Company Name (if applicable) _____

Donor Name (first and last) _____

Preferred Mailing Address* _____

City _____ State _____ Zip _____

Phone _____ Email _____

FOR STAFF USE ONLY

Date Received _____ Received By _____ Item # _____