

DERBY DAY SOIRÉE

The fastest way to make a difference.

Don't miss your chance to be part of the most exciting two minutes in sports and support the youngest and bravest patients receiving care at Cleveland Clinic Children's.

Saturday, May 2, 2026

5:30 p.m. Cocktail reception (with mint juleps, of course)

6:45 p.m. Post time! Bidding and viewing of the 152nd Kentucky Derby

7:30 p.m. Program and dinner featuring Southern fare

9:00 p.m. Dessert & live entertainment

DERBY ATTIRE ENCOURAGED

Cleveland, Ohio

EVENT LEADERSHIP

Umberto P. Fedeli
Honorary Chair

HONORARY AMBASSADORS

Edward J. DeBartolo Jr.

Umberto P. Fedeli

Norma Lerner

Mario Morino

*Honorary Ambassadors previously
recognized at Derby Day Soirée*

clevelandclinic.org/derbyday

Partnership Opportunities

\$100,000 (\$95,200 TAX DEDUCTIBLE) **PRESENTING PARTNER**

- Premium table seating for 20
- Upgraded table experience with personal server and top-shelf beverage offerings
- Customizable Soirée branding opportunity upon request
- Recognition throughout all promotional materials, event signage and communications

\$50,000 (\$47,000 TAX DEDUCTIBLE) **TRIPLE CROWN PARTNER**

- Premium seating for 10
- Upgraded table experience with personal server and top-shelf beverage offerings
- Recognition:
 - Verbal and print at Soirée
 - In select e-communications
 - Logo on event website
 - Logo on digital event communication

\$25,000 (\$23,400 TAX DEDUCTIBLE) **THOROUGHbred PARTNER**

- Preferred seating for 8
- Recognition:
 - Verbal and print at Soirée
 - Logo on event website
 - Logo on digital event communication

\$12,000 (\$10,400 TAX DEDUCTIBLE) **GRANDSTAND PARTNER**

- Seating for 8
- Name recognition at Soirée and on event website

\$7,500 (\$5,900 TAX DEDUCTIBLE) **TABLE**

- Seating for 8

\$1,000 (\$800 TAX DEDUCTIBLE) **INDIVIDUAL TICKET**

Proceeds fund transformative pediatric care and research at Cleveland Clinic Children's.

I WOULD LIKE TO MAKE A GIFT IN THE AMOUNT OF \$ _____

I AM UNABLE TO ATTEND, but I would like to donate our table back to Cleveland Clinic Children's patients and their families.
(Families will be notified of your generosity.)

PARTNER INFORMATION

Name _____

Company Name _____

(Write partnership name as it should appear in print.)

Address _____

City, State, ZIP _____

Contact _____

(To obtain logo and table guest names)

Daytime Telephone _____

Email _____

PAYMENT OPTIONS

Check

(Please make check payable to Cleveland Clinic Children's.)

Pay online | clevelandclinic.org/derbyday

Please invoice me | Total amount \$ _____

Bill me later *(payment due 05/02/2026)*

Please sign _____

Date _____

Your signature confirms your pledge/payment. Once your commitment is received, you will be sent additional event details and contacted for table guest names.



Cleveland Clinic Children's

For questions about the event or for customized partnership opportunities, please contact cchildrenderby@ccf.org.

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