

Our Mission

Making Communities Healthier®

Our Vision

We want to create places where:

- People choose to come for healthcare,
- Physicians want to practice, and
- Employees want to work.

2017 Sponsorship & Donation Guidelines

Danville Regional Medical Center (DRMC) proudly supports a broad spectrum of health and community related causes which support programs and initiatives aimed at improving the overall health and well-being of our community.

Key Objectives

Our charitable donation and sponsorship activities are focused on two key objectives:

- Health
- Education of Health/Wellness Initiatives

Based on our key objectives, we have developed criteria for donations and activity/event sponsorship. Our criteria stems from a desire to fulfill our mission of Making Communities Healthier®; and in helping the citizens of our community access appropriate care, stay healthy and build healthy communities.

Donation Criteria

We will consider requests for donations from non-profit organizations that meet one or more of the following criteria:

Activity has a direct or implicit connection with the listed key objectives

 Activity provides opportunities for the promotion or presentation of DRMC's strategic initiatives

Activity/Event Sponsorship Criteria

We are also committed to partnering with non-profit organizations on activities or events focused on improving the health and wellness of those living in our community through increased awareness and education. Our partnerships foster good will in the community and promote our brand. A suitable sponsorship is one that is mutually beneficial for DRMC and the community we serve.

You may qualify for a sponsorship if your organization's program meets the following criteria:

- Sponsorship has a direct or implicit connection with the listed key objectives
- Activity provides opportunities for the promotion or presentation of DRMC's strategic initiatives

Policy and Procedures Concerning Donations and Sponsorships

The objective of these guidelines on donation and sponsorship request is to ensure the equitable distribution of approved funds with a view to investing in our community. Danville Regional Medical Center reviews sponsorship and donation requests based on the nature of the activity and on the organization's philosophy, allocation criteria and available budget.

Screening Criteria

In order to evaluate the many requests that we receive that may fall within our guidelines, we have established criteria that will provide us with the pertinent information we need. Please complete the attached application (in its entirety) and submit to:

Danville Regional Medical Center Attn: LeAnne Roller, Sponsorship/Donation Request 142 Main South Street | Danville, VA 24541 Or email: leanne.roller@lpnt.net

Note:

- Organizations seeking sponorship or donation must make formal request by submitting a completed application. Only completed applications will be reviewed. Incomplete applications will be returned and may delay funding consideration.
- Organizations seeking funding for the 2017 calendar year must submit a completed application no later than January 31, 2017.
- An organization whose request for sponsorship or donation is approved will be notified no later than February 28, 2017.
- An organization may receive only one donation or sponsorship per calendar year.
- An organization whose request for sponsorship or donation is approved will be required to submit a "Post-Event Outcomes" form, within 15 days of the event.



Donation and Sponsorship Application

anville Regional	For internal complet	ion only:
MEDICAL CENTER	Date received	Date of program/project
DukeMedicine quality affiliate		In-kind Financial \$
Applicant Information		
		tact Person
		nty
		Website
E-mail addresss		Ц
Donation/Sponsorship Info	rmation	
		Program date
riogram or project title		
		or charitable donations as described in the guidelines.
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 $\underline{NOTE:}\ Please\ fill\ out\ this\ form\ in\ its\ entirety.\ Incomplete\ applications\ will\ be\ returned\ without$ review. Please include with this application: a) documentation of your organization's 501c(3) status; b) a completed LifePoint Supplier Ownership Certificate; and c) copy of your organizations signed W9 application.

Organizations receiving sponsorship or donation must complete and return the Post-event Outcomes Form within 15 days of the program completion date. Failure to do so may impede future sponsorship or donation requests.

Please return your application by mail or e-mail to one of the addresses indicated below:

Mail: Danville Regional Medical Center

Attn: LeAnne Roller 142 South Main Street Danville, VA 24541

E-mail: ;eanne.roller@lpnt.net



Post-Event Outcomes Form

Please return this form within 15 days of the program completion date by e-mail or fax. E-mail: leanne.roller@lpnt.net

Fax: 434-799-4587

Program Outcomes	Organization		Contact Person	
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Nutrition	Asthma	Cancer	Dental care (children)	☐ Dental care (adults)
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