

Tsawwassen Springs 2024 Festival of Lights

Tsawwassen Springs is delighted to announce our sixth annual Festival of Lights, sponsored and decorated by families, community groups and businesses. The sponsorship of Christmas trees on beautiful Tsawwassen Springs golf course will raise funds for Delta Hospital and Community Health Foundation to purchase a Stress Test System for Cardiology.

Our family friendly community event is a wonderful opportunity to wander through our beautifully decorated forest of trees and enjoy the goodwill of the holiday season.

2024 Festival of Lights

November 29th, 2024 to January 5th, 2025

Tsawwassen Springs Golf Course

5133 Springs Blvd Tsawwassen, BC V4M 0A2

FESTIVAL FEE PAYMENT AND CHARITABLE DONATION

FESTIVAL FEE: \$135 payable to TGCC Management LLP. The Festival Fee includes the Christmas tree and sponsor name sign.

CHARITABLE DONATION: Suggested minimum donation of \$250 payable to Delta Hospital and Community Health Foundation.

TREE DECORATION

TIME TO DECORATE: November 27th & 28th, 2024

HOW TO DECORATE: Use only CSA approved LED lights, **due to inclement weather please make sure to weatherproof your decorations and attach them securely to your tree. You may also need an extension cord and step ladder.** Be creative, have fun – prizes to be won!

TREE LIGHTING CEREMONY: The official lighting of the trees by Mayor George V. Harvie on Friday, November 29th, 2024 at 6pm.

TAKE DOWN: Please be sure to remove all lights and decorations from your tree from January 6th to January 8th, 2025. Material left on the trees after January 8th will be disposed of as property of the Tsawwassen Springs.

BY SPONSORING A TREE YOU WILL RECEIVE:

- A Christmas tree **generously donated by Harris Nursery**
- A place in the forest of trees in the Festival of Lights
- Personalized sponsor sign in front of your tree
- Sponsor name listed on Tsawwassen Springs website

Please complete and return the form to jill@tsawwassensprings.ca

Your support of Delta Hospital and Community Health Foundation is greatly appreciated.



TREE SPONSOR INFORMATION FOR SIGNAGE (please print clearly)

Name: _____

Company (As it will appear on signage): _____

Address: _____

City: _____ Postal Code: _____

Phone: (_____) _____ Email: _____

FESTIVAL FEE PAYMENT AND CHARITABLE DONATION: (PLEASE FILL OUT #1 & #2)

1. FESTIVAL FEE \$135

Cheque to *TGCC Management LLP* VISA MasterCard AMEX

Credit Card Number: _____ Exp. ____/____ CVV _____

Name on the Card (personal or company): _____

Signature: _____

2. CHARITABLE DONATION AMOUNT TO DHCHF: \$_____ (\$250 suggested min. donation)

Cheque payable to *Delta Hospital and Community Health Foundation* VISA MasterCard AMEX

Credit Card Number: _____ Exp. ____/____ CVV _____

Name on the Card (personal or company): _____

Signature: _____

DONOR INFORMATION FOR TAX RECEIPT (IF DIFFERENT FROM SPONSOR INFO) (please print clearly)

Name: _____

Company: _____

Address: _____

City: _____ Postal Code: _____

Phone: (_____) _____ Email: _____

All donations will receive a charitable tax receipt. Charitable Business Number - 12984-4114-RR0001

