

ROCK 2 CURE DIPG BENEFIT CONCERT & AUCTION

The Barn @Wilson Farm | 1425 210th Ave E | Lake Tapps WA 98391 Saturday, June 21, 2025

March 14, 2025

Dear Friends,

Thank you for your consideration in donating to our fundraiser, *Rock2Cure DIPG Benefit Concert*. Our event will be held on Saturday, June 21, 2025, at The Barn @ Wilson Farm. We are collecting funds and items for the silent auction table and would truly appreciate your support.

On December 22, 2015, our son Camron was diagnosed with Diffuse Intrinsic Pontine Glioma (DIPG). This is a rare pediatric brainstem glioma which affects over 300 children each year. This aggressive tumor is at the base of the brainstem and is notoriously difficult to treat.

Camron Cozzi was a 15-year-old sophomore lacrosse player at Bonney Lake High School when he was diagnosed. He was a quick-witted young man with a sparkle in his eye and a smile that melted hearts. Along with our older son, Jordan, we fought hard for our Camron. During Camron's 27-month battle, we were surrounded by our friends, family, and a community who helped support our efforts to find a cure. Camron would leave us on March 10, 2018, his 18th birthday. That same year we decided to create a foundation in his honor, continuing the fight for a cure. This was Camron's wish.

The proceeds from this auction will help us support researchers and their trials as well as families currently in the battle. Our foundation also belongs to an advocacy group, DDRFA.org where together we have been able to grant funds to researchers all over the world.

If you can help, please fill out the attached procurement form. We would like to receive all donations by June 13, 2025. Thank you in advance for your support.

Sincerely,

Paul, Cyndí, Sjordan

Team Cozzi Foundation

www.teamcozzifoundation.org

EIN 35-2638377 501(c)(3)

253.261.8239

cmcozzi@comcast.net



SATURDAY, June 21, 2025 5:30PM -10:30PM

The Barn @ Wilson Farm 1425 210th Ave E. Lake Tapps WA 98391

DONATION FORM

TeamCozzi Representative:	
NAME:	PHONE:
Donor Information:	
DONOR NAME or BUSINESS: (Name as it would appear on Bid Sheet)	
DONOR CONTACT NAME:	TELEPHONE: EMAIL:
DONOR ADDRESS:	CITY: STATE: ZIP:
Item Information:	
Item Information: ITEM NAME:	DONOR-ESTIMATED VALUE: (Please state dollar amount)
ITEM DESCRIPTION – PLEASE INCLUDE QUANTITY, SIZE, COLOR, NUMBE	ER OF PERSONS, WEEKS, DAYS/NIGHTS AND <u>ALL RESTRICTIONS:</u>
DONOR Information: DONOR NAME or BUSINESS: (Name as it would appear on Bid Sheet) DONOR CONTACT NAME: DONOR ADDRESS: Item Information:	MARK APPROPRIATE BOX:
	Item accompanied formDonor provides Certificate
	Item needs to be picked-upCommittee to create Certificate
	Delivery of item by DonorPromotional material provided by Do
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NOTES.	
DONOR Information: DONOR NAME or BUSINESS: (Name as it would appear on Bid Sheet) DONOR CONTACT NAME: DONOR ADDRESS: Item Information: ITEM NAME: ITEM DESCRIPTION – PLEASE INCLUDE QUANTITY, SIZE, COLOR, NUMBER DONOR or DONOR REPRESENTATIVE SIGNATURE & DATE: Volunteer use only:	

THANK YOU FOR YOUR SUPPORT!

Delivery/Pickup Information or Questions - Contact Cyndi 253.261.8239 / cyndi@teamcozzi.com

PLEASE RETURN YOUR DONATION & FORM BY FRIDAY, June 13th Please keep a copy for your records - EIN 35-2638377 501(c)(3)