

ANNUAL 2020

Sponsorship Opportunities

Contact Name _____

Company Name (i.e. ABC Company, Inc. - your name as you would like it printed in media communications) _____

Mailing Address _____

Apt. or Suite # _____

City _____

State _____

Zip _____

Phone _____

Email _____

Instagram Handle, if any _____

Twitter Handle, if any _____

Facebook Handle, if any _____

Annual Sponsorship Levels

Annual Diamond • \$30,000

- \$15,000 level at both events
- Two (2) premium tables of 10 at both events
- Full page color ad on cover (first come first serve, then inside program books)
- All media/PR benefits of Platinum level
- Complimentary gift on table at both events

Annual Platinum • \$20,000

- \$10,000 level at both events
- Premium table of 10 at both events
- Full page color ad for both events
- Company logo on invitations, podium sign, powerpoint, program book, event website with links, social media & press release promotion
- Recognition by emcee at both events

Annual Gold • \$15,000

- \$7,500 level at both events
- Preferred table of 10 at both events
- Full page ad for both events
- Company logo on invitations
- Company logo on signage in OLV atriums
- Social media promotion

Annual Silver • \$10,000

- \$5,000 level at both events
- Eight (8) reserved seats at both events
- Full page ad for both events
- Company logo on invitations
- Company logo on signage in OLV atriums
- Social media promotion

Annual Bronze • \$5,000

- \$2,500 level at both events
- Eight (8) reserved seats at both events
- Half page ad for both events
- Company logo on event invitations
- Social media promotion

Annual Ruby • \$4,000

- \$2,000 level for both events
- Full page ad for both events
- Social media promotion
- NO ATTENDANCE

Annual Sapphire • \$3,000

- \$1,500 level at with six (6) seats at both events
- Half page ad for both events

PAYMENT OPTIONS

Please choose one:

Check enclosed payable to OLV Charities.

Amount: \$ _____

Count on us for support; we will defer payment until prior to each event.

Amount: \$ _____

Charge my MC Visa Amex Discover

Amount: \$ _____

Card #: _____ Exp. Date: ____/____/____

Name on Card: _____

Address for Card (If different than above): _____



Mail this completed form to:

OLV Charities • 780 Ridge Road • Lackawanna NY 14218

Please email your company logo (EPS preferred) concurrent with this form to rpollinger@OLVcharities.org

THANK YOU FOR YOUR SUPPORT!