



DRUID HEIGHTS COMMUNITY DEVELOPMENT CORPORATION

Annual Fundraiser

Gala Dinner & Roast of Senator Larry Young

Friday, March 20, 2020 7:00 pm to 11:00 pm Martin's Caterers West

SPONSORSHIP PACKAGES

\$15,000 PLATINUM Sponsor

- Our exclusive Community Champion Two Platinum Sponsor tables for 20 of your guests – Center Front.
- Introduction during Awards portion of Program.
- Significant branding leading up to the event on the Druid Heights website.
- Company logo and name prominently displayed at the event.
- Special photo opportunity with Honorees, the Druid Heights CDC Executive Director & Board of Directors during event.
- 4-Color Full Page ad within Program Book.

\$10,000 GOLD Sponsor

- Two Gold Sponsor tables for 20 of your guests – Priority Seating.
- Introduction during Awards portion of Program.
- Company logo and name prominently displayed on Druid Heights website and at the event.
- Gold Sponsor listing with company logo in Program Booklet
- 4-Color Full Page ad within Program Book.

\$5,000 – SILVER Sponsor

- One Silver Sponsor table for 10 of your guests – Preferred Seating.
- Silver Sponsor listing with company logo in Program Booklet
- 4-Color Half Page ad within Program Book.

\$2,500 – BRONZE Sponsor

- One Bronze Sponsor table for 10 of your guests – Preferred Seating.
- Bronze Sponsor listing with company logo in Program Booklet
- 4-Color Half Page ad within Program Book.

\$150 – Individual Ticket: _____ # of Tickets

PROGRAM BOOK ADVERTISING OPPORTUNITIES

Deadlines for Sponsorship Listings or Individual Tribute Book Ads are March 1, 2020

\$1,000 Gold Tribute

Full Page, Color
(6.5" w X 9" h)

\$750 Silver Tribute

Half Page, Color
(6.5" w X 4" h)

\$500 Full Page Ad

Full Page, B/W
(6.5" w X 9" h)

\$250 Half Page Ad

Half Page, B/W
(6.5" w X 4" h)

INFORMATION & PAYMENT DETAILS

Check Enclosed Please make payable to *Druid Heights CDC*

Name:

Company:

Address: Suite #:

City: State: Zip:

Email:

Phone:

Bill Credit Card

Amount: \$

Name on Card:

Credit Card #:

Expiration Date: 3-Digit Security Code:

Billing Address:

City: State: Zip:

Signature: