

March 6, 2018

Silver Screen Luncheon

Sponsorship Opportunities

- | | |
|---|---|
| <input type="checkbox"/> Presenting Sponsor \$10,000
- Category exclusivity
- Special recognition from the stage
- Opportunity for company to display promotional material in the lobby before and after the event
- Full page ad in luncheon program with premier placement
- Premier positioning and recognition on all signage, social media, invitations, press announcements, and website at www.soafi.org
- Preferred sponsor table of ten (10) to luncheon | <input type="checkbox"/> Luncheon Sponsor \$5,000
- Half page ad in luncheon program
- Recognition on all signage, social media, invitations, press announcements, and website at www.soafi.org
- Preferred sponsor table of eight (8) to luncheon |
| <input type="checkbox"/> Performance Sponsor \$2,500
- Name listed in luncheon program
- Recognition on all signage, social media, invitations, press announcements, and website at www.soafi.org
- Four (4) preferred seating tickets to luncheon | <input type="checkbox"/> Artist Sponsor \$1,000
- Name listed in luncheon program
- Recognition on all signage, social media, invitations, press announcements, and website at www.soafi.org
- Two (2) preferred seating tickets to luncheon |

I will not attend the event and would like my sponsorship to be 100% tax deductible.

Underwriting Opportunities

Contributions are 100% tax deductible and include recognition on signage, social media, invitations, press announcements, & website

- | | |
|--|--|
| <input type="checkbox"/> Invitations \$3,000
<input type="checkbox"/> Program \$2,500
<input type="checkbox"/> Photography \$2,000 | <input type="checkbox"/> PR/Media \$1,500
<input type="checkbox"/> Table Favors \$1,000
<input type="checkbox"/> Valet \$1,000 |
|--|--|

* Sponsorship deadline to be listed on printed materials: December 14, 2017 *

Name _____ Company _____

Name as you wish to be listed _____

Method of Payment Check American Express MasterCard Visa

Credit Card # _____ Exp. Date _____

Billing Address _____ City _____ State _____ Zip _____

Phone _____ Signature _____

I am unable to attend but please accept my donation of \$ _____

Please return this form by mail , fax, or email to: School of the Arts Foundation, Inc.

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