

Spring Blossoms Gala Opportunities

\$10,000 Presenting Sponsorship

- Sponsor name included in event titling
- Two tables of ten with premium seating for the event
- Complimentary valet parking for your table
- Three complimentary bottles of fine wine at table
- Name or company logo displayed in lobby as Presenting Sponsor
- Name or company logo displayed on the screen during event
- Name or company logo displayed on table
- Full page ad in event program
- Website recognition including link
- Acknowledgement of sponsorship in the introduction and closing of the event

\$5,000 Sponsorship

- One table of ten with premium seating for the event
- Complimentary valet parking for your table
- Three complimentary bottles of fine wine at table
- Name or company logo displayed on the screen during event
- 1/2 page ad in event program
- Name or company logo displayed on table
- Website recognition including link

\$2,500 Sponsorship

- One table of ten with excellent seating for the event
- Three complimentary bottles of fine wine at table
- Name or company logo displayed on the screen during event
- 1/4 page ad in event program
- Name or company logo displayed on table
- Website recognition including link

\$1,500 Sponsorship

- One table of ten
- Name or company logo displayed on the screen during event
- Listing in the event program
- Website recognition including link

Contact: Erika Durbin
303-867-4605
Erika_Durbin@MariaDroste.org



Maria Droste
Counseling Center
 Colorado's Center for Mental Health



Sponsorship Reservation Form

Sponsorship Levels:

- \$10,000 Presenting Sponsorship \$5,000 Sponsorship \$2,500 Sponsorship \$1,500 Sponsorship
- I would like to make my sponsorship fully tax deductible and donate my table/tickets back to Maria Droste Counseling Center
- I am unable to attend, but enclosed is my tax-deductible contribution of \$ _____

Individual or Organization (as it should appear in printed materials)

Point of Contact

Address

City

State

Zip

Phone

Fax

Email

Individual Authorizing Sponsorship

Signature

Method of Payment:

- Enclosed is my check for \$ _____ payable to Maria Droste Counseling Center
- Please send an invoice
- Please charge my credit card \$ _____ Visa MasterCard American Express Discover

Card number

Expiration date

CVV number***

Name as it appears on card

Zip code affiliated with card

***Please note, American Express CVV numbers are usually 4 digits, while other cards are typically 3 digits long

Signature of cardholder

Please complete and return to:

Maria Droste Counseling Center
 Attn: Erika Durbin
 1355 S Colorado Blvd., Suite C-100
 Denver, CO 80222-3305
 Erika_Durbin@MariaDroste.org

Questions? Contact:

Erika Durbin
 303-867-4605
 Erika_Durbin@MariaDroste.org

Dinner program deadline is **Monday, March 27, 2017**. Reservations received after this date may not be included in the program.