



**TO CELEBRATE LIFE**  
BREAST CANCER FOUNDATION

No one should face breast cancer alone.

## 2017 Stepping Out Gala — Sponsorship Benefits

<b>Presenting Partner</b> (\$50,000)	<b>Premier Partner</b> (\$30,000)	<b>Partner</b> (\$20,000)	<b>Benefactor</b> (\$15,000)	<b>Patron</b> (\$10,000)	<b>Supporter</b> (\$5,000)	<b>Friend</b> (\$2,500)	<b>Contributor</b> (\$1,000)
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### YOUR SPONSORSHIP provides:

#### Recognition

- Logo or name on website
- Gala podium/stage exposure and video presentation
- Exposure to our large network of supporters and high profile Bay Area residents

#### Advertising

- Gala advertising – 2 months prior to event
- Golden Gate Bus exterior ads and Golden Gate Ferry interior cabin signs (Logos in ads for **Supporter** sponsorship level and above)
- Marin Independent Journal – weekly ads (Logo or name for **Friend** sponsorship level and above)
- Logo or name in gala invitation and program

#### Seating

- Tables of 10
- Premier or Preferred seating location



<b>Presenting Partner</b>	<b>Premier Partner</b>	<b>Partner</b>	<b>Benefactor</b>	<b>Patron</b>	<b>Supporter</b>	<b>Friend</b>	<b>Contributor</b>
3 Tables (30 seats) Premier	2½ Tables (26 seats) Premier	2 Tables (20 seats) Premier	1½ Tables (16 seats) Premier	1 Table (10 seats) Preferred	6 seats Preferred	4 seats Preferred	2 seats Preferred

**WE CAN CUSTOMIZE** your benefits to suit your needs — call us!

# 2017 Stepping Out Gala — Sponsorship Confirmation

**MARK YOUR CALENDAR:** Stepping Out To Celebrate Life – **September 23, 2017**

**PLEASE RETURN SPONSORSHIP CONFIRMATION BY:** EMAIL: [info@tocelebratelife.org](mailto:info@tocelebratelife.org) FAX: 888.825.3230 MAIL: PO Box 367, Kentfield, CA 94914.  
Early confirmation ensures recognition in all promotional materials as stated. **PLEASE CALL** 415-455-5882 with any questions.

## SPONSORSHIP LEVELS

**Presenting Partner** (\$50,000)     **Partner** (\$20,000)     **Patron** (\$10,000)     **Friend** (\$2,500)  
 **Premier Partner** (\$30,000)     **Benefactor** (\$15,000)     **Supporter** (\$5,000)     **Contributor** (\$1,000)

**TOTAL PLEDGE \$** \_\_\_\_\_

New Sponsor  Returning Sponsor

Will attend Stepping Out Gala

Name of company, organization or individual as it will appear on table sign and in print/web \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone \_\_\_\_\_ Fax \_\_\_\_\_ Email \_\_\_\_\_

Authorized by: Name \_\_\_\_\_ Title \_\_\_\_\_ Signature \_\_\_\_\_

List my/our name(s) for print and web as \_\_\_\_\_

Prefer that gift remain anonymous

Make gift: in Honor of \_\_\_\_\_ in Memory of \_\_\_\_\_

Send notification of gift to: Name \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

## PAYMENT METHOD

Check enclosed  Charge Credit Card  Visa  MC  AMEX Card # \_\_\_\_\_ Exp. Date: \_\_\_\_\_

Cardholder Name \_\_\_\_\_ Signature \_\_\_\_\_

Contact person: Name \_\_\_\_\_ Title \_\_\_\_\_

Phone \_\_\_\_\_ Fax \_\_\_\_\_ Email \_\_\_\_\_

To Celebrate Life Breast Cancer Foundation is a 501(c)3 nonprofit. Federal Tax ID: #94-3323358  
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