



TO CELEBRATE LIFE™  
BREAST CANCER FOUNDATION



Marin IJ Readers' Choice Awards  
*Winner—Best Charity Nonprofit Gala*  
Stepping Out To Celebrate Life™



Marin Magazine - Best of the County  
*The Best Annual Galas in Marin*  
Stepping Out To Celebrate Life™

## Stepping Out To Celebrate Life™ — 2026 Sponsorship Benefits

Premier Partner	Partner	Benefactor	Patron	Supporter	Friend	Contributor
\$30,000	\$20,000	\$15,000	\$10,000	\$6,000	\$3,500	\$1,750
26 seats	20 seats	16 seats	10 seats	6 seats	4 seats	2 seats

Please respond by **July 17** to be included in our gala print ads; **August 10** for gala program

### SPONSOR BENEFITS:

#### Premier Partner, Partner, Benefactor

- Premier seating and wine
- Special recognition from the stage during the program
- Name included in opening show video
- Logo/name in Marin Magazine and Marin Independent Journal gala ads
- Logo/name on our website, event webpage and gala program
- Exposure to our wide network of supporters in pre/post event emails and social media

#### Patron, Supporter

- Preferred seating
- Name included in opening show video
- Logo/name in Marin Magazine and Marin Independent Journal gala ads
- Logo/name on our website, event webpage and gala program
- Exposure to our wide network of supporters in pre/post event emails and social media

#### Friend, Contributor

- Gala seating
- Name included in opening show video
- Logo/name on our website, event webpage and gala program
- Exposure to our wide network of supporters in pre/post event emails and social media



Commitment Deadline: **July 17** for inclusion in gala print ads; **August 10** for gala program

2025 Stepping Out To Celebrate Life  
Drew Altizer Photography

# Stepping Out To Celebrate Life™ — 2026 Sponsorship Confirmation

**MARK YOUR CALENDAR:** Stepping Out To Celebrate Life™ – **SATURDAY, OCTOBER 3, 2026**

**PLEASE RETURN SPONSORSHIP CONFIRMATION BY AUGUST 10:** EMAIL: [info@tocelebratelife.org](mailto:info@tocelebratelife.org) MAIL: PO Box 367, Kentfield, CA 94914.

Early confirmation **before July 17** ensures recognition in all promotional materials as stated. **PLEASE CALL** 415-455-5882 with any questions.

## SPONSORSHIP LEVELS

\_\_\_\_ **Premier Partner** (\$30,000)      \_\_\_\_ **Benefactor** (\$15,000)      \_\_\_\_ **Supporter** (\$6,000)      \_\_\_\_ **Contributor** (\$1,750)  
\_\_\_\_ **Partner** (\$20,000)      \_\_\_\_ **Patron** (\$10,000)      \_\_\_\_ **Friend** (\$3,500)

**TOTAL PLEDGE \$** \_\_\_\_\_ **I will be attending this year's event** \_\_\_\_\_ **I am unable to attend this year's event** \_\_\_\_\_

Name of company, organization or individual \_\_\_\_\_

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

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

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

\_\_\_\_ List my/our name(s) for table sign, 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 \_\_\_\_ Credit card \_\_\_\_ Visa \_\_\_\_ MC \_\_\_\_ AmEx Card # \_\_\_\_\_ Sec. Code: \_\_\_\_\_ Exp. Date: \_\_\_\_\_

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

**CONTACT PERSON** for guest list: Name \_\_\_\_\_ Title \_\_\_\_\_

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

To Celebrate Life Breast Cancer Foundation is a 501(c)(3) nonprofit. Federal Tax ID: #94-3323358  
PO Box 367, Kentfield, CA 94914 | 415-455-5882 | [www.tocelebratelife.org](http://www.tocelebratelife.org)

