

## Sponsorship, Ticket & Advertising Form



Where hope and help come together.

| S   | ponsors                                 |                                 |
|---|---|---------------------------------|
| ☐ Fashionista Sponsor \$25,000  | ☐ Classic Sponsor \$10,000              |                                 |
| ☐ Chic Sponsor \$7,500  | ☐ Edgy Sponsor \$5,000                  |                                 |
| ☐ Electric Sponsor \$3,000  | ☐ Bohemian Sponsor \$2,000              |                                 |
| $oxedsymbol{\square}$ Early Sponsor Invitation Printing (by Oct   | . 13th)                                 |                                 |
| Adve  | ertisements                             |                                 |
| ☐ 7 Views (minimum) \$1,500   | ☐ 3 views (minimum) \$300               |                                 |
| ☐ 6 Views (minimum) \$1,000   | 2 views (minimum) \$200                 |                                 |
| ☐ 5 Views (minimum) \$800   | ☐ Tribute to Lea Listing \$100* No Logo |                                 |
| 4 views (minimum) \$500   | ☐ Discount for Themed Ad                |                                 |
|   | Tickets                                 |                                 |
| Limite  | ed to 350 Guests!                       |                                 |
| ☐ Early Bird Ticket \$275 each  | ☐ Early Bird Table \$2,750 each         |                                 |
| (purchased by (12/12/25)  | (purchased by 12/12/25)                 |                                 |
| ☐ Single Ticket \$300 each  | ☐ <b>Table</b> \$3,000 each             |                                 |
| <b>3 3</b>  | attend, please accept our do            | nation of: \$                   |
| Name:   |   |                                 |
| Business/Company Name:  |   |                                 |
| Contact Name:   | Committee Member:                       |                                 |
| mail:   | Phone #                                 |                                 |
| Address:  |   |                                 |
| City:   |   | Zip code:                       |
|   | TINFORMATION                            |                                 |
| ☐ Check Enclosed ☐ Credit Card  | ☐ Send Invoice to address abo           | ove \( \subseteq \text{CVV#} \) |
| ☐MC ☐Visa ☐Amex ☐ Discover Care   | d #                                     | Exp. Date                       |
| Remit Payment: Lea's Foundation for Leukemia Research, Inc. 522-H Cottage Grove Road Bloomfield, CT 06002 | Friday ad o                             | rchase online chere             |

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