

2018 Emerald Ball Sponsorship Opportunities

Sponsorship Levels

Payment Form:

Name as it appears on card: _____

Matching Sponsor Amount TBD	Hope Emerald \$20,000 donation		Emerald \$10,000 donation	
◊ If you are interested	♦ 20 tickets to Emerald Ball		♦ 10 tickets to Emerald Ball	
in becoming a	♦ Premium Ad Location		◊ Full-page ad in program(Premium)	
Matching gift sponsor	◊ Program listing		♦ Program listing	
please call Lisa Abbott-Cisco	♦ Special mention by emcee		♦ Special mention by emcee	
to learn more	◊ Preferred seating		♦ Preferred seating	
	◊ Event signage		v v v ojev voa obaciig	
	♦ Logo and mention on website			
	Ruby	Sa	pphire	
	000 donation		donation	
	kets to Emerald Ball	◊ Four ticket	ckets to Emerald Ball -page program ad	
◊ Full-p	age program ad	♦ Half-pag		
◊ Progra	am listing	◊ <i>I</i>	Program listing	
Staff Table Underwriting	Prograr	n Advertising		
\$2,000 donation	Please circle choice:			
♦ Enables Pluta staff to attend with	out charge			
◊ Program listing	♦ Fu	ll-page color ad	\$1,000	
Mentioned by EMCEE 0		If-page ad	\$500	
♦ Listing on tent cards at staff tables	\$ Qu	arter-page ad	\$250	
	Individual Ticket	\$2	225	
	Patron Ticket (name lis	ted in program): \$2	275	
Yes, I would like to support the Em	erald Ball as follows:			
Matching Sponsor:	Ruby:	Adver	tiser (as noted):	
Hope Emerald:	· · · ———		dual/Patron Ticket:	
Emerald:	Staff Table: Oth		Donation:	
Contact name:	Phone:		Email:	
Name/Company (as it should appea	r in program):			

Checks: Make payable to Pluta Cancer Center Foundation

_____ Signature: _____

Card #: ______ Exp. Date: ______ Security Code: _____

Please return this form to Pluta Cancer Center Foundation, Development Office, in the enclosed envelope. If you have any questions, contact Lisa Abbott-Cisco at (585) 486-0607 or Lisa_AbbottCisco@urmc.rochester.edu

