



"We Are Of The Families, For The Families"

Gianna Nicole's Heart of Hope Foundation 9th Annual Gala

THURSDAY, JUNE 27, 2019

El Caribe - 5945 Strickland Ave - Brooklyn, New York 11234

Please join us in our mission to continue Gianna's legacy by directly assisting families whose children are battling cancer.

2019 Sponsorship Contract *Journal Sponsorship*

Diamond Page \$1,000

Gold Page \$800

Silver Page \$500

Bronze Page \$300

Full White Page \$200

Half White Page \$100

Love Sponsor

\$5,000

- * Tickets for 12 guests
- * Gold Page in our Journal
- * Your Company/ Organization displayed prominently in Main Ballroom
- * 1 Value Raffle Bag for each guest
- * 1 Super Raffle for each guest

Hope Sponsor

\$3,000

- * Tickets for 6 guests
- * Silver Page in our Journal
- * Your Company/ Organization displayed prominently in Main Ballroom
- * 1 Value Raffle Bag for each guest

Butterfly Sponsor

\$2,000

- * Tickets for 4 guests
- * Bronze page in our Journal
- * All Butterfly Sponsors will be featured on a sign in the main lobby
- * 1 Value Raffle bag for each guest

Please include company Logo when submitting this form in one of the following formats: JPEG, TIFF, PDF

Please E-mail to: Butterflyhoh@gmail.com | **Deadline May 30, 2019 for Sponsorship**

ALL SPONSORS WILL RECEIVE PROMOTIONAL RECOGNITION ON THE GIANNA NICOLE'S HEART OF HOPE WEBSITE.

Sponsorship Level \$ _____ Journal Ad \$ _____ Tickets _____ Donation in lieu of attendance \$ _____

Name/Company Name: _____

CHECK, PAYABLE TO:

**To Gianna Nicole's Heart of Hope
Foundation, Inc.**

Address: _____

Phone: _____ E-mail: _____

**P.O. Box 90215
Staten Island, NY 10309**

Guest Names: _____

(Guest names will be added to our attendee list. Please check in at door under your company name.)

CREDIT CARD INFO: **AMEX** **VISA** **MASTER CARD**

Cardholders Name: _____ Signature: _____

Credit Card Number: _____ Exp. Date: _____ Security Code: _____

Billing Address: _____ City: _____ State: _____ Zip Code: _____