

THE GALA

\$10,000 Innovation Sponsorship (charitable contribution: \$7,852)

- 12 tickets with premier seating at a private table
- VIP champagne service during dinner
- One (1) overnight stay in an Executive Suite with Breakfast
- Six (6) valet vouchers (8-24 hours)
- Full-page program ad
- Verbal acknowledgment in opening remarks
- Logo recognition in event invitation (650 invites), program (250 pieces), e-blasts (4,000 constituents), onsite signage, and gala webpage of Luminarts' website

\$5,000 Creativity Sponsorship (charitable contribution: \$3,210)

- 10 tickets with premier seating at a private table
- One (1) overnight stay in a King Deluxe Room with Breakfast
- Five (5) valet vouchers (8-24 hours)
- Half-page program ad
- Verbal acknowledgment in opening remarks
- Name recognition in event invitation, program, e-blasts, onsite signage, and gala webpage of Luminarts' website

\$2,500 Impact Sponsorship (charitable contribution: \$1,465)

- Six (6) tickets with premier seating at the event
- Three (3) valet vouchers (4-8 hours)
- Name recognition in event invitation, program, e-blasts, onsite signage, and gala webpage of Luminarts' website

\$1,000 Premier Tickets (charitable contribution \$655)

- Two (2) tickets to the event
- One (1) valet voucher (4-8 hours)
- Name listing in the event program (250 pieces)

\$300 Individual Ticket (charitable contribution: \$150)



Questions? Please contact Marlena Dzis, Development Director, at marley@luminarts.org or 312-692-2379.

THE GALA

Contact Information

Name: _____

Recognition Name (if different from above): _____

Company: _____

Address: _____

E-mail Address: _____ **Phone:** _____

Signature: _____

Yes! I'd like to sponsor The Gala at the \$_____ level.

Please note that sponsorships committed by February 12, 2020 will be recognized on the event invitation.

I'd like to purchase ____ (please specify amount) tickets to The Gala (\$300/each).

I am unable to attend but would like to make a charitable contribution of \$_____ to Luminarts.

Payment Information

Credit Card (please circle): Visa Mastercard Amex Discover

CC# _____ CVV _____ Exp. Date _____

Check Please make checks payable to "Luminarts Cultural Foundation."

ULC Account Please charge my ULC account # _____.

This form may be returned to:

Attn: Marlena Dzis, Development Director
Luminarts Cultural Foundation
65 W. Jackson Blvd. Chicago, IL 60604

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