

SPONSOR FORM

November 28, 2017 | Herscher Hall, Skirball Cultural Center
Honoring Grammy-Winning Violinist JOSHUA BELL and Music Educator VINCENT WOMACK

CONTACT INFORMATION

NAME/S (as you would like to be acknowledged)

COMPANY/ORGANIZATION

CONTACT PERSON

ADDRESS

EMAIL

PHONE

SPONSORSHIP LEVELS

All contributions are tax-deductible. EIN #: 87-0776958. \$80/ticket is not tax-deductible.

All levels include Silent Auction & Pre-Concert Reception.

- \$50,000 Symphonic Sponsor:** Includes 25 Platinum Tickets (2 full & 1 half tables). Company recognized as Title Sponsor. Name/logo on the step-and-repeat, event signage, tribute program, event website, annual newsletter & report, and publicity materials surrounding the gala.
- \$25,000 Vivace Sponsor:** Includes 20 Platinum Tickets (2 tables). Name/logo on the step-and-repeat, event signage, tribute program, event website, annual newsletter & report, and publicity materials surrounding the gala.
- \$10,000 Crescendo Sponsor:** Includes 10 Platinum Tickets (1 table). Name/logo on the step-and-repeat, event signage, tribute program, event website, annual newsletter, and publicity materials surrounding the gala.
- \$7,500 Scherzando Sponsor:** Includes 10 Silver Tickets (1 table). Name/logo on the step-and-repeat, event signage, tribute program, event website, and annual newsletter.
- \$5,000 Forte Sponsor:** Includes 5 Platinum Tickets (half table). Name/logo on event signage, tribute program and event website.
- \$3,000 Dolce Sponsor:** Includes 5 Silver Tickets (half table). Name/logo in the tribute program.
- \$1,500 Allegro Sponsor:** Includes 2 Platinum Tickets. Name/logo in the tribute program.

TICKETS

- \$500 Platinum Ticket:** Includes Preferred Seating (1 ticket).
- \$400 Silver Ticket:** Includes General Seating (1 ticket).
- I would like to underwrite** **ticket(s) for a teacher or school principal.**

PAYMENT DETAILS

- Enclosed is a check in the amount of \$** _____ **made payable to Education Through Music-LA.**

- Please charge my credit card in the Amount of \$** _____

Please check one: **Visa** **MasterCard** **Amex** **Discover**
Card Number _____ Exp. Date _____

Card Holder Name _____ Sec. Code _____

Billing Address (if different from above) _____

All table/ticket purchases must be submitted by **October 18, 2017** to be listed in materials.

Please email this form and all guest names to sponsor@etmla.org.