



INTERFAITH CARING MINISTRIES



30TH ANNUAL FESTIVAL OF TREES COSMIC CELEBRATION

SPONSORSHIP LEVELS

Each Sponsor package includes:

- ☆ Table for 10
- ☆ Company name & logo on signage
- ☆ Ad with logo on Gala webpage and ICM website
- ☆ Recognition in press releases & marketing materials
- ☆ Signage w/logo on table

SUPERNOVA \$5,000 X _____

Includes all benefits in sponsor package plus:

- ☆ Slideshow recognition—full-screen with logo
- ☆ Ad includes hyperlink
- ☆ 9-10ft tree decorated at your place of business or home
- ☆ 20 raffle tickets
- ☆ 5 bottles of wine/champagne

GALACTIC \$3,500 X _____

Includes all benefits in sponsor package plus:

- ☆ Slideshow recognition—half-screen with logo
- ☆ Ad includes hyperlink
- ☆ 6-8ft tree decorated at your place of business or home
- ☆ 10 raffle tickets
- ☆ 3 bottles of wine/champagne

CONSTELLATION \$2,000 X _____

Includes all benefits in sponsor package plus:

- ☆ Slideshow recognition—quarter-screen with logo
- ☆ 5 raffle tickets
- ☆ 1 bottle of wine/champagne

STARDUST TABLE \$1,200 X _____

- ☆ Table for 10
- ☆ Slideshow recognition
- ☆ Signage at table

INDIVIDUAL SEATING

TICKETS \$150 EACH X _____

TREE SPONSORS

3-4 Ft. Tree \$ 400 X _____

6-8 Ft. Tree \$ 700 X _____

9-10 Ft. Tree \$ 1,000 X _____

Tree Sponsors may choose to have their tree decorated at their place of business or at their residence.

GALA ADS \$225 X _____

Includes Slideshow Ad – 1/4-screen slideshow ad, Company logo with hyperlink on Gala webpage and ICM website

UNDERWRITER OPPORTUNITIES

ENTERTAINMENT: \$2500 X _____

Includes all benefits in sponsor package plus:

- ☆ Slideshow recognition—quarter-screen with logo
- ☆ Signage at table
- ☆ 10 raffle tickets
- ☆ 2 bottles of wine/champagne

DECORATIONS: \$500 X _____

PRINTING: \$500 X _____

WINE (4 NEEDED): \$250 X _____

SIGNAGE: \$500 X _____

All Underwriters receive slideshow recognition, Company name on sign, and Recognition on Gala webpage and ICM website.

ACKNOWLEDGMENT

Name to use in all acknowledgements:

I WILL BE PAYING BY:

_____ Check _____ MasterCard _____ Visa _____ American Express

Card #: _____ Exp. Date: _____ SEC Code _____

Name on card: _____

Billing Address: _____ City: _____

State: _____ Zip: _____

Signature: _____ Total Amount: _____

Please mail form to Interfaith Caring Ministries,

151 Park Ave., League City, TX 77573,

fax to 281-332-3823, or email to events@icmtx.org.