



The Chamber of Commerce of Eastern Connecticut Foundation

36th Annual Holiday Gala

Friday, December 6, 2019 - Uncas Ballroom at Mohegan Sun - 5:30 PM

A charity gala to benefit the children of eastern Connecticut

Sponsorship Opportunities and Ticket Sales - Please fill out and return by November 15, 2019

☐ Gold Sponsorship - \$5,000

- Highest priority recognition in all publications, marketing materials, and advertisements
- Two reserved tables of 10 with premium seating
- Company logo displayed at the event
- Premium full-page program ad (4.75" W x 6.875" H)

☐ Bronze Sponsorship - \$1,500

- Recognition at the event
- Reserved table of 10
- Company logo displayed at event
- Quarter-page ad

☐ Silver Sponsorship - \$2,500

- Recognition in marketing materials
- Reserved table of 10 with premium seating
- Company logo displayed at the event
- Half-page program ad (4.75" W x 3.375" H)

Program Ad Sizes (Black and White)

- ☐ Inside covers (5" W x 8" H) - \$2,000
 - ☐ Full-page (5" W x 8" H) - \$1,000
 - ☐ Half-page (5" W x 3.875" H) - \$600
 - ☐ Quarter-page (2.375" W x 3.875" H) - \$325
- *Sponsors receive first priority

Please forward sponsorship or advertising request with company logo or program ad, if applicable, to admin@ChamberECT.com no later than November 15 (PDF, JPG, or EPS format).

Donations Welcome

To make a donation, please call 860-701-9113 or complete this form with your election.

- ☐ Reservation only: Please make _____ reservations at \$95 per person.
- ☐ Reserved table of 10: Please reserve _____ tables(s) at \$1,100 per table.
- ☐ Please accept my donation of \$_____ in honor or in memory of _____

Payment Information (Advance payment required)

Total Enclosed: \$_____

Contact Name: _____ Number of Tickets: _____

Company: _____

Address: _____ City: _____ State: _____ Zip: _____

Phone: _____ Fax: _____ Email: _____

☐ Check Enclosed: Please make checks payable to Chamber of Commerce of Eastern CT Foundation

Payment by credit card (check one): ☐ MC ☐ VISA ☐ AMEX ☐ DISC

Card number: _____ - _____ - _____ - _____ Exp: _____ / _____

3 or 4 Digit Security Code: _____ Amount: \$_____ Name on card: _____

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

Signature: _____ Date: _____

Respond by mail: 914 Hartford Turnpike, Suite 206, Waterford, CT 06385 • Respond by fax: 860-701-9902

PRE-PAYMENT IS REQUIRED ON ALL RESERVATIONS. Tickets will be mailed upon receipt of payment.

The Chamber of Commerce of Eastern CT Foundation is a 501(c)(3) organization. Contributions are tax deductible to the extent allowed by law.