

# FRASSATI CATHOLIC HIGH SCHOOL



Saturday, September 16, 2017

5:00 p.m. – 10:00 p.m.

## Sponsorship Opportunities

### Presenting Sponsor (1) - \$3,000

- Name or logo prominently displayed on banner and printed materials
- Opportunity to speak and to have an information booth at Trivia Night
- Opportunity to donate a door prize gift for the event
- Team/table of eight (8) for Trivia Night with premium seating
- Eight (8) raffle tickets

### Beverage Underwriter (1) - \$1,750

- Name or logo prominently displayed on banner and printed materials
- Opportunity to donate a door prize gift for the event
- Team/table of eight (8) for Trivia Night with premium seating
- Eight (8) raffle tickets

### Hospitality Sponsors (4) - \$500

- Name or logo on banner and printed materials
- Verbal recognition at Trivia Night
- Team/table of eight (8) for Trivia Night with preferred seating
- Eight (8) raffle tickets

### Commemorative Koozie Sponsor (1) - \$500

- Name or logo on koozies, banner, and printed materials
- Verbal recognition at Trivia Night
- Two seats for Trivia Night
- Two (2) raffle tickets

### Trivia Round Sponsor (10) - \$200

- Name or logo on banner, slides for sponsored round and printed materials
- Verbal recognition at Trivia Night
- Two (2) raffle tickets

*Sponsorships are subject to availability and must be confirmed by the Director of Advancement.*

Tax ID Number: 26-3051354

# FRASSATI CATHOLIC HIGH SCHOOL



## 2017 SPONSORSHIP REGISTRATION FORM

Sponsorship: \_\_\_\_\_ Number of tickets included: \_\_\_\_\_ Amt.: \$ \_\_\_\_\_

General Registration Option (without a sponsorship):

- \_\_\_ Team/Table of Eight - \$160
- \_\_\_ Seat/s (get assigned to an Open Team Table) - \$20 each
- \_\_\_ Seat/s for Faculty or Staff Member/s - \$20 each
- \_\_\_ Cash Donation: \$ \_\_\_\_\_

Item/s, gift card/s, etc. to be used as raffle, door, or contest prize/s as described here (including expiration dates, restrictions, and contact information):

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_ Value: \_\_\_\_\_ (based on donor's valuation)

Business Name: \_\_\_\_\_

Contact Person: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

City/State/Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

## METHOD OF PAYMENT

\_\_\_ My check made payable to Frassati Catholic High School is enclosed

\_\_\_ Charge my credit card in the amount of \$ \_\_\_\_\_:

American Express

Master Card

Discover

Visa

Name on card: \_\_\_\_\_ Exp. Date \_\_\_\_\_

Card number: \_\_\_\_\_ CVV Code: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Tax ID Number: 26-3051354