



34TH ANNIVERSARY GALA CELEBRATION

SPONSORSHIP AND JOURNAL ADVERTISING RESERVATION FORM

COMPANY _____

CONTACT NAME _____ TITLE _____

BILLING ADDRESS _____

CITY _____ STATE _____ ZIP _____

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PLATINIUM (Legacy) SPONSOR \$35,000 \$ _____

GOLD (Visionary) SPONSOR \$25,000 \$ _____

SILVER (Champion) SPONSOR \$15,000 \$ _____

BRONZE (Benefactor) SPONSOR \$10,000 \$ _____

INDIVIDUAL TABLES (10 Seats) X \$5,000 \$ _____

GALA JOURNAL ADVERTISEMENT:
 \$2,000 \$1,000 \$500 \$300 \$ _____

SPONSOR A SENIOR TO ATTEND THE GALA / INDIVIDUAL TICKETS X \$500 \$ _____

I'M UNABLE TO ATTEND BUT I'D LIKE TO MAKE A DONATION TO IPR/HE \$ _____

TOTAL COMMITMENT..... \$ _____

 AUTHORIZED SIGNATURE DATE

Your signature attests that you are authorized to make the sponsorship commitment indicated above and agree to pay the charges associated with the commitment when invoiced. Sponsorships are non-refundable.

PLEASE RETURN THIS FORM WITH PAYMENT TO:

Institute Puerto Rican and Hispanic Elderly 105 East 22nd Street, Suite 711, New York, NY 10010
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