



Event Underwriting & Sponsorship Opportunities

Register or make a gift online at www.Vinekeepers.org/Festa

Thursday, April 1, 2021 • 10am – 12pm • Rosine Hall at The Dallas Arboretum

Champion of Life (\$25,000+)

- Premier seating for up to twenty
- Recognition in event-related materials
- Exclusive VIP gift

Guardian of Life (\$10,000+)

- Prominent seating for up to ten
- Recognition in event-related materials
- Exclusive VIP gift

Defender of Life (\$5,000+)

- Distinguished seating for up to ten
- Recognition in event-related materials
- Exclusive VIP gift

Sustainer of Life (\$2,500)

- Excellent seating for up to ten
- Recognition in event-related materials
- Exclusive VIP gift

Preserver of Life (\$2,000)

- Seating for up to ten
- Recognition in event-related material
- Exclusive VIP gift

Patron Sponsor (\$1,000)

- Priority seating for 2
- Recognition in event-related materials
- Exclusive VIP gift



Enhancing Trust

Thrive Women's Clinic is a 501(c)(3) organization. If you are attending this event, the nondeductible portion of your payment will be reflected on your receipt.

EVENT SPONSORS (Does not include seating)

- Culinary Sponsor (\$7,500)
- Venue Sponsor (\$5,000)
- Décor Sponsor (\$3,000)
- Life-Saving Story on Film Sponsor (\$2,500)
- Prize Sponsor (\$1,500)

Tables may be "shared" by no more than two underwriters.

In order to receive recognition in event-related materials, underwriting contract must be received no later than March 17th.

_____ I am unable to attend but wish to contribute \$_____ to Thrive Women's Clinic.

_____ I decline all underwriting benefits; the total amount of my gift will be tax deductible.

_____ I wish my gift to be anonymous.

Name for Recognition: _____

E-mail: _____
(please print legibly)

Cell: _____ Church: _____

Payment Options: _____ Enclosed is my check for \$_____ made payable to Thrive Women's Clinic.
_____ Please charge \$_____ to my MC Visa AMEX (circle one).

Name on Card: _____

Credit Card Acct. No: _____ Exp. Date: _____ CVV2 (code) : _____

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

Paypal available online at www.Vinekeepers.org/Festa