



SPONSORSHIP FORM

5th Annual Caring Center Charity Gala

CASINO NIGHT

The Caring Center serves thousands of people in Boone County, Indiana each year through the distribution of food and clothing, and educational programming.

Your contribution as a Sponsor of the 5th Annual Caring Center Charity Gala, will make a difference in the lives of many Boone County residents. Together, we can give hope to residents in need and show them that they are not alone in their fight for a better life. Your donation will go a long way in helping The Caring Center stabilize families in crisis and move those caught in poverty towards self-sufficiency.

How will your donation help?

- \$1,000.00 – Stocks the Food Pantry with Staples for 1 Month
- \$ 500.00 – Provides Emergency Rent Assistance for 1 Family
- \$ 300.00 – Helps Feed and Clothe a Child for 1 Year
- \$ 200.00 – Provides One Graduation Award for Completing the “Getting Ahead” Educational Program
- \$ 100.00 – Helps Support the “Table Talk” Program, which Helps Families Better Manage their Food Dollars
- \$ 50.00 – Helps a Child in Need with School Supplies for 1 Year
- \$ 25.00 – Provides a Holiday Food Basket for 1 Family

“Stabilizing families in crisis and moving those caught in poverty towards self-sufficiency.”

The Caring Center
1230 Ransdell Court
Lebanon, IN 46052
www.thecaringcenter.net



5th Annual Caring Center Charity Gala CASINO NIGHT

When: Saturday, February 9, 2019

Location: Golf Club of Indiana, Cardinal Room

Time: 6:00 PM – 12:00 AM

Event Overview:

- 6:00 PM – Cocktail Hour with Appetizers & Silent Auction
- 6:30 PM – Plated Dinner Service
- 7:30 PM – Presentation & Live Auction
- 8:00 PM – Casino Games Open
- 9:30 PM – Casino Games Close, Winners Announced
- 10:00 PM – Open Dancing with My Yellow Rickshaw
- 12:00 AM – Event Ends

Entertainment provided by: Broad Ripple Sertoma, T-Bone Disc Jockey & My Yellow Rickshaw



5th Annual Caring Center Charity Gala CASINO NIGHT

TITLE SPONSORSHIP - \$10,000.00

- Casino Night Event Presented by Your Company
- Company Name and/or Logo on Event Communication, Signage, and Publicity
- Full Page Ad with Company Name, Logo and Contact Information in Event Program
- Company Logo Projected Electronically During Event
- Company Logo on Gambling Chip Bags at Event
- Recognition on the Caring Center's Event Webpage, in a Prominent Location, with a Click-Through to Your Company's Website
- Recognition in Caring Center's Annual Report
- Recognition of Your Company via The Caring Center's Social Media Accounts
- 10 Tickets to the Event – Includes: dinner, unlimited beer, wine, and cocktails and \$25.00 worth of chips per player
- Company Logo presented at Assigned Dinner Table



5th Annual Caring Center Charity Gala CASINO NIGHT

Gold Sponsorship - \$5,000.00

- ½ Page Ad with Company Name, Logo and Contact Information in Event Program
- Company Logo Projected Electronically During Event
- Recognition on the Caring Center's Website in a Prominent Location
- Recognition in Caring Center Annual Report
- Recognition of Your Company via The Caring Center's Social Media Accounts
- 8 Tickets to the Event – *Includes: dinner, unlimited beer, wine, and cocktails and \$25.00 worth of chips per player*
- Company Logo presented at Assigned Dinner Table

Silver Sponsorship - \$2,500.00

- ¼ Page Ad with Company Name, logo and Contact Information in Event Program
- Company Logo Projected Electronically During Event
- Company Logo Presented on the Caring Center's Website
- Recognition in Caring Center's Annual Report
- Recognition of Your Company via The Caring Center's Social Media Accounts
- 4 Tickets to the Event – *Includes: dinner, unlimited beer, wine, and cocktails and \$25.00 worth of chips per player*
- Company Logo presented at Assigned Dinner Table



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Additional Sponsorship Opportunities:

- **\$1,000.00 Band Sponsor (1 Needed)**
 - Banner with Company Logo Hung Near Band (*Band plays from 10:00 PM – 12:00 PM*)
- **\$750.00 DJ Sponsor (1 Needed)**
 - Sign with Company Logo Placed on DJ Table for Duration of Event
- **\$600.00 Casino Night Winners (1 Needed)**
 - 3 Prizes Gift Wrapped in Company Branded Colors
 - Company Information Provided with Gifts
- **\$500.00 Favors Sponsor (1 Needed)**
 - Sign with Company Logo Placed on Favor Table
- **\$500.00 Activity Sponsor (3 Needed)**
 - Sign with Company Logo Placed on Activity Table (Example: Wine Pull)
- **\$250.00 Centerpiece Sponsor (4 Needed)**
 - Company Logo Placed on a Minimum of 6 Centerpieces
- **\$100.00 Raffle Sponsor (3 Needed)**
 - 1 Raffle Prize Wrapped in Company Branded Colors
 - Company Information Provided with Raffle Prize

***** All sponsors will be recognized via electronic signage throughout the duration of the event. *****



5th Annual Caring Center Charity Gala CASINO NIGHT

Sponsorship Form – Page 1

Company Name: _____

Company Address: _____

City: _____ State: _____ Zip: _____

Company Website: _____

Contact Name: _____ Contact Number: _____

Contact Email Address: _____

Sponsorship Type (Circle):	Additional Opportunity: _____	Silver \$2,500.00	Gold \$5,000.00	Title \$10,000.00
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Credit Card or Check (Circle)

Please return this form to Save the Date Event Planning along with payment to: dawn@savethedateindy.com or
Save the Date Event Planning, 14127 Nicholas Drive, Carmel, IN 46074



5th Annual Caring Center Charity Gala CASINO NIGHT

Sponsorship Form – Page 2

For Check Payments:

Please make your check payable to The Caring Center.

Please return **Page 1** of the *Sponsorship Form* and your Sponsorship Donation to the following mailing address:

Save the Date Event Planning
c/o: The Caring Center Gala
14127 Nicholas Dr.
Carmel, IN 46074

For Credit Card Payments/Donations:

Please return **Page 1 and Page 2** of the *Sponsorship Form* to the following email address:

dawn@savethedateindy.com or via snail mail at the mailing address listed above.

CREDIT CARD AUTHORIZATION FORM:

I hereby authorize, *The Caring Center* and/or *Save the Date Event Planning, LLC* to charge the credit card below for my Sponsorship Donation to the 4th Annual Caring Center Charity Gala.

Company Name: _____ Name on Credit Card: _____

Credit Card Number: _____ Expiration Date: _____

Security Code (3 digit number on back of card): _____ Billing Zip Code: _____

Sponsorship Type: _____ Sponsorship Amount: _____

Signature: _____