



Pregnancy & Infant Loss Support, Inc.
touching lives... healing hearts... giving hope...

2012 Angel Ball
One Night in Tuscany
April 28, 2012

Sponsorship Form

Platinum Package—\$10,000

Our Event Sponsor will receive signage of the event, recognition as an honorary ambassador, recognition by the emcee during the event, premium advertising in the event program (first come basis), recognition in *Sharing* (our national newsletter), recognition on the Share website and two tables of ten (10) at the event.

Gold Package—\$5,000

Our Gold Sponsor will receive recognition by the emcee during the event, table tent advertising at each table, advertising in the event program, recognition in *Sharing* (our national newsletter), recognition on the Share website and one table of ten (10) at the event.

Silver Package—\$2,500

Our Silver Sponsor will receive advertising in the event program, recognition in *Sharing* (our national newsletter) and one table of ten (10) at the event.

Share Ambassador—\$2,000

Our ambassador will receive recognition by the emcee, mention in the event program and two (2) reservations to the Angel Ball.

Table Sponsor—\$1,500

Our table sponsors will receive premium in the event program (first come basis) and one table of ten (10) at the event.

Program Advertising

- \$500 Inside Front Cover Advertisement
- \$500 Inside Back Cover Advertisement
- \$250 Full Page Advertisement
- \$125 Half Page Advertisement
- \$ 75 Quarter Page Advertisement
- \$ 50 Business Card Advertisement

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Please select your level of sponsorship:

- _____ **Platinum**
- _____ **Gold**
- _____ **Silver**
- _____ **Share Ambassador**
- _____ **Table Sponsor**

- _____ **Inside Front Cover Advertisement**
- _____ **Inside Back Cover Advertisement**
- _____ **Full Page Advertisement**
- _____ **Half Page Advertisement**
- _____ **Quarter Page Advertisement**
- _____ **Business Card Advertisement**

Business: _____
(As it should appear in the Angel Ball program)

Contact: _____

Name(s): _____

Address: _____

City/State/Zip: _____

Phone: _____ Fax: _____ E-mail: _____

I have enclosed a check made payable to Share or Please charge my Visa MC

Account #: _____ Expiration Date: _____

Please send the bottom portion of this form & payment to:
National Share Office, Attn: Megan Nichols, 402 Jackson Street, St. Charles, MO 63301

Please email ad artwork in jpeg format to mnichols@nationalshare.org by March 15, 2012.