

ARMENIAN BONE MARROW DONOR REGISTRY
 323-663-3609
 info@abmdr.net
 www.abmdr.am
 1146 Central Avenue, #533
 Glendale, CA 91202

Match for Life 20th Anniversary Gala

SUNDAY • AUGUST 25 • 2019



Fimi: 818-419-0316

ARMENIAN BONE MARROW DONOR REGISTRY SPONSORSHIP FORM

Company _____
 Address _____
 City _____ State _____ Zip Code _____
 Phone (____) _____ Cell (____) _____ E-Mail _____

SPONSORSHIP LEVELS FOR PROGRAM BOOK

<input type="radio"/> MAJOR EVENT SPONSOR	\$20,000+	<i>A table for 12, Recognition in Program Book Sponsorship acknowledgment in pre-and post-event(s) marketing</i>
<input type="radio"/> PLATINUM SPONSOR	\$10,000	<i>A table for 10 and Page in Program Book</i>
<input type="radio"/> DIAMOND SPONSOR	\$5,000	<i>Eight tickets and Page in Program Book</i>
<input type="radio"/> GOLD SPONSOR	\$2,500	<i>Four tickets and Page in Program Book</i>
<input type="radio"/> SILVER SPONSOR	\$1,000	<i>Two tickets and Page in Program Book</i>
<input type="radio"/> ABMDR 20TH ANNIVERSARY CANDLE LIGHTING CEREMONY	\$1,000	<i>Two tickets and participation in cake cutting ceremony</i>
<input type="radio"/> FULL PAGE	\$500	<p style="text-align: center;">ARTWORK Minimum Resolution: 300 dpi Formats: pdf, eps, tiff and psd</p> <p style="text-align: center;">AD SIZE Full Page: 5.5/8" X 8.7/8" Half Page: 5.5/8" x 4.3/8"</p>
<input type="radio"/> HALF PAGE	\$250	
<input type="radio"/> FRONT COVER	\$5,000	
<input type="radio"/> BACK COVER	\$3,000	
<input type="radio"/> INSIDE COVER(S)	\$2,000	
<input type="radio"/> GALA TICKET	\$150	

MESSAGE _____

CHECK CASH MASTER CARD VISA AMEX

CREDIT CARD # _____ EXP. DATE _____

SPONSORSHIP \$ _____	SPONSOR NAME _____
TICKETS \$ _____	SIGNATURE _____
TOTAL \$ _____	DATE _____

Please make your tax deductible donation payable to: **ABMDR 347 West Stocker Street, #208 Glendale, CA 91202**
 The ABMDR is a 501(c)(3) not for profit organization. Tax ID # 05-0573780

The deadline for all submissions is August 15, 2019