



WOMEN'S
CRISIS CENTER
Hope Is Found Here

Please partner with Women's Crisis Center

in the 6th annual

Toast for Hope

Wine Pairings Fundraiser

at Drees Pavilion in Covington, KY

Wednesday, April 30th 2014 • 5:30 PM - 8:30 PM

Gourmet hor d'oeuvres provided by Jeff Thomas Catering

Please indicate at which level you would like to be a sponsor:

<u>Sponsorship Levels</u>	<u>Level of Support</u>	<u>Main Benefits</u>
<input type="checkbox"/> Presenting Sponsor	\$10,000.00	• Customized benefits
<input type="checkbox"/> Platinum Sponsor	\$5,000.00	• Full page ad in program with logo • Name in all press materials • 8 complimentary tickets
<input type="checkbox"/> Gold Sponsor	\$2,500.00	• Half page ad in program with logo • 6 complimentary tickets
<input type="checkbox"/> Silver Sponsor	\$1,000.00	• Quarter page ad in program with logo • 4 complimentary tickets
<input type="checkbox"/> Bronze Sponsor	\$550.00	• Quarter page ad in program with logo • 2 complimentary tickets
<input type="checkbox"/> Host / Hostess	\$150.00	• Name of individuals in program (Please indicate how you would like to be listed on the back of this page) • 2 complimentary tickets

Additional tickets are available at \$65.00 in advance or \$70.00 at the door.

For more information please contact Anu Reddy 859.372.3571 or areddy@wccky.org

*Send .jpg logo no later than March 30th, 2014 to areddy@wccky.org in order to receive full sponsor benefits

- We cannot attend the event, but would like to make a personal contribution: \$ _____
- Payment enclosed

Contact Information

Name of Contact _____
 Company Name _____
 Company Address, City, ZIP _____
 Contact/Company Phone Number _____ Contact E-mail _____

Please return completed form and payment to:

Women's Crisis Center, Attn: "Toast for Hope", 3580 Hargrave Drive, Hebron, KY 41048

Payments can also be made online at wccky.org

Thank you for your generous support of Women's Crisis Center. Please see reverse side to enter important information.

Sponsor & Host/Hostess Individual Attendee Information

Attendee 1:

Name _____

Company Name _____

Address, City, ZIP _____

Phone Number _____

Email _____

Attendee 3:

Name _____

Company Name _____

Address, City, ZIP _____

Phone Number _____

Email _____

Attendee 5:

Name _____

Company Name _____

Address, City, ZIP _____

Phone Number _____

Email _____

Attendee 7:

Name _____

Company Name _____

Address, City, ZIP _____

Phone Number _____

Email _____

Attendee 2:

Name _____

Company Name _____

Address, City, ZIP _____

Phone Number _____

Email _____

Attendee 4:

Name _____

Company Name _____

Address, City, ZIP _____

Phone Number _____

Email _____

Attendee 6:

Name _____

Company Name _____

Address, City, ZIP _____

Phone Number _____

Email _____

Attendee 8:

Name _____

Company Name _____

Address, City, ZIP _____

Phone Number _____

Email _____