



2016 ANNUAL BREAKFAST SPONSORSHIP LEVELS AND BENEFITS

In appreciation for donation of \$10,000 underwriting the expenses of our annual breakfast, Healing Sponsors receive:

- Preferred seating at breakfast for 2 at head table or one table seating 10 persons
- Full page color display ad in Breakfast program
- Acknowledgement at Breakfast
- Inclusion on all event publicity
- Listing on O'Brien House website

In appreciation for donation of \$5,000 underwriting the expenses of our annual breakfast, Hope Sponsors receive:

- Preferred seating at breakfast for 2 at head table or one table seating 10 persons
- Full page b&w display ad in Breakfast program
- Acknowledgement at Breakfast
- Inclusion on all event publicity
- Listing on O'Brien House website

In appreciation for donation of \$2,500 underwriting the expenses of our annual breakfast, Help Sponsors receive:

- Preferred seating at breakfast for 2 or one table seating 10 persons
- 1/2 page b&w display ad in Breakfast program
- Acknowledgement at Breakfast
- Inclusion on all event publicity
- Listing on O'Brien House website

In appreciation for donation of \$1,000 underwriting the expenses of our annual breakfast, Friends receive:

- Preferred seating at breakfast for 2
- 1/4 page b&w display ad in Breakfast program
- Acknowledgement at Breakfast
- Inclusion on all event publicity
- Listing on O'Brien House website



**2016 Annual Breakfast
Sponsorship Agreement**

Please note this information may be obtained electronically on our website. Find the Sponsorship Information button on the News & Events page and download the Sponsorship Registration packet. Payments may be also made online www.obrienhouse.org.

Name of Corporate or Individual Sponsor
(Name as you prefer to be recognized in program and other collaterals):

_____ I/We would prefer to be designated as "Anonymous"

Contact Person: _____ Phone: _____

E-mail: _____

Mailing Address: _____

I/We would like to be a Breakfast Sponsor at the following sponsorship level:

_____ **Healing Sponsor (\$10,000)**

_____ **Hope Sponsor (\$5,000)**

_____ **Help Sponsor (\$2,500)**

_____ **Friend (\$1,000)**

Method of Payment:

_____ Enclosed is a check for \$_____ as full payment for sponsorship.

_____ Enclosed is a partial payment of \$_____. Please bill the balance to me in
2 / 3 / 4 monthly installments (circle one).

_____ Please call me to arrange a credit card payment.

Payments may be also made online www.obrienhouse.org.

Fulfillment Considerations for Benefits of Sponsorship:

_____ Enclosed is a camera-ready logo or copy for Breakfast program ad.

_____ Digital image of logo/copy will be emailed by Sept. 7 to thamilton@obrienhouse.org.

Signature of Sponsor: _____ Date: _____

Thank you for your support!

446 N. 12th Street – Baton Rouge, LA 70802 – 225.344.6345 - Tax ID # 72-0702820

www.obrienhouse.org