



29th Anniversary Banquet

June 2nd, 2022

5:30PM- 8:00PM

Clovis Veterans Memorial
808 4th St, Clovis, CA 93612

TABLE

SPONSORSHIPS

All table sponsorships include seating for 8 guests, table signage and recognition in the event's program. Table location determined by sponsorship level.

- Sustaining Sponsor** includes full-screen topline 1920x1080 (pixel)
- Major Event Sponsor** Includes 1/2 screen 2nd line 960x540 (pixels)
- Vision Sponsor** Includes 1/3 screen 3rd line 640x360 (pixels)
- Gold Sponsor** Includes 1/4 screen 4th line 480x270 (pixels)
- Silver Sponsor** Includes 1/5 screen 5th line 384x216 (pixels)
- Bronze Sponsor** Does not include ad

	Early Bird Pricing	After May 4th	Quantity	Total
Sustaining Sponsor	\$9,250	\$10,250	_____	\$_____
Major Event Sponsor	\$4,750	\$5,250	_____	\$_____
Vision Sponsor	\$2,500	\$2,750	_____	\$_____
Gold Sponsor	\$1,350	\$1,500	_____	\$_____
Silver Sponsor	\$750	\$850	_____	\$_____
Bronze Sponsor	\$300	\$400	_____	\$_____

AD SPONSORSHIPS

DINNER SPONSORSHIPS

All program ads are in full color. Submit camera-ready artwork to gracewins@hopenow.org or we can design your ad for you.

	Early Bird Pricing	After May 4	Total
Full screen , topline 1920x1080 (pixel)	\$1,800	\$2,000	\$_____
1/2 screen , 2nd line 960x540	\$900	\$1,000	\$_____
1/3 screen , 3rd line 640x360	\$450	\$500	\$_____
1/4 screen , 4th line 480x270(pixels)	\$225	\$250	\$_____
1/5 screen , 5th line 384x216(pixels)	\$60	\$75	\$_____

Sponsor dinner plates for Hope Now youth to attend the banquet	Per Plate	Quantity	Total
	\$25	_____	\$_____

THREE EASY OPTIONS TO SUBMIT YOUR SPONSORSHIP:

1. Register at www.hopenow.org
2. Return completed form to HNFY via e-mail to gracewins@hopenow.org or mail to PO BOX 5294, Fresno, CA 93755
3. Call or Text HNFY office at 559.237.7215

For further information, contact our office at (559) 237-7215 or gracewins@hopenow.org. Deadline for table sponsorship is June 1st 2022. Deadline for ads is May 15, 2022.

Summary and Payment Info

Table Sponsorship \$ _____ Name _____

Ad Sponsorship \$ _____ Business Name _____

Dinner Sponsorship \$ _____ E-mail _____ Preferred Phone _____

General Donation \$ _____ Check enclosed

TOTAL: \$ _____ Please charge the following credit/debit card:

Name on card _____ Amount \$ _____

Card number _____ Expiration date _____

Signature _____

*All gifts are tax deductible as allowed by the IRS.