



S A T U R D A Y , M A R C H 2 8 , 2 0 0 9

SPONSORSHIP FORM

Contact _____
Company _____
Address _____
City, State & Zip _____
Daytime Phone _____
E-mail _____

I/we wish to participate at the following level:

- ☐ **Presenting Sponsor** \$ 5,000
Includes 2 tables for 10, full-color cover ad in program, banner at the podium and top billing in all publicity
- ☐ **Reception Sponsor** **SOLD**
Includes 1 table for 10, full-color cover ad in program, banner at cocktail reception and listing in all publicity
- ☐ **Gold Sponsor** \$ 2,500
Includes 1 table for 10, full-page ad, individual banner in ballroom and listing in all publicity
- ☐ **Blue Sponsor** \$ 1,853
Includes 1 table for 10, half-page ad, listing on sponsor banner in the ballroom and all publicity
- ☐ **Plaid Sponsor** \$ 1,250
Includes 1 table for 10, half-page ad, listing on sponsor signage and publicity
- ☐ **Benefactor Table** \$ 1,000
Listing on Benefactor banner, half-page ad; provides seating for Sisters of Notre Dame and student participants
- ☐ **Ad Book**
- ☐ Full page \$ 500
 - ☐ Half page \$ 250
 - ☐ Quarter page \$ 100

☐ Check Enclosed (please make checks payable to Notre Dame Academy)

Please charge my: ☐ Master Card ☐ Visa

Name (as it appear on card) _____

Credit Card # _____

Signature _____ Exp. _____

PLEASE RETURN THIS FORM NO LATER THAN **FEBRUARY 1, 2009.**

Mail: Office of Institutional Advancement, NDA, 1073 Main Street, Hingham, MA 02043

Fax: 781.740.1683

Or register online at www.ndahingham.com

NOTRE DAME ACADEMY . 1073 MAIN STREET, HINGHAM, MA 02043 . 781.749.5930