

UNITED WAY OF VENTURA COUNTY 2018 SPONSORSHIP OPPORTUNITIES

SPIRIT AWARDS SPONSOR BENEFITS - SEPTEMBER 13, 2018	PRESENTING SPONSOR \$25,000	PREMIER SPONSOR \$10,000	PLATIUM SPONSOR \$8,000	GOLD SPONSOR \$5000	SILVER SPONSOR \$3,000	BRONZE SPONSOR \$2,000
Seats at the Spirit Awards	Sponsorsh 20	i <mark>p deadline to</mark> 10	have all adve	ertising privile 6	ges – August 4	30, 2018 2
Event materials include company name	✓	√	√	V	1	V
Logo & Link to your website on VCUnitedWay.org & VolunteerVenturaCounty.org	✓	√	√	14/	V	X
Logo & Link to your website in UWVC E-newsletters (Oct/Nov/Dec)		/		1	✓	1
Digital full screen color logo on invitations and ad at event	~	1				
Logo displayed on Day of Caring event t-shirt	✓		811 815			
Digital ½ screen color logo on invitations and ad at event			/	√	√	

ALL DAY OF CARING SPONSOR BENEFITS BELOW:

DAY OF CARING SPONSOR BENEFITS - SEPTEMBER 29, 2018	CARING SPONSOR \$5,000	CONTRIBUTING SPONSOR \$3,000	SUPPORTING SPONSOR \$1,000	
Logo & Link to your website on VCUnitedWay.org & VolunteerVenturaCounty.org	\checkmark	✓	✓	
Logo & Link to your website in UWVC E-newsletters (Oct/Nov/Dec)	✓	✓	✓	
Logo displayed on Day of Caring event t-shirt	\checkmark	√		

UNITED WAY OF VENTURA COUNTY

2018 SPONSORSHIP COMMITMENT FORM

SPIRIT AWARDS SPONSOR BENEFITS SEPTEMBER 13, 2018	PRESENTING SPONSOR \$25,000	PREMIER SPONSOR \$10,000		PLATIUM SPONSOR \$8,000	GOLD SPONSOR \$5,000	SILVER SPONSOR \$3,000	BRONZE SPONSOR \$2,000	
DAY OF CARING SPONSOR BENEFITS SEPTEMBER 29, 2018	SI	CARING PONSOR \$5,000		ONTRIBUING SPONSOR \$3,000		SUPPORTING SPONSOR \$1,000		
Sponsorsh	ip deadline t	o have all advert	tising pr	ivileges -	- August 30, 2	2018		
SPONSORSHIP COMPANY INFO	ORMATION	ı						
Total Sponsorship Investment: \$								
Sponsor Company Name:								
Contact Person:								
Address:								
City:						Zip:		
Email:	F	Phone: ()		Fax: (_)		
PAYMENTINFORMATION								
Check enclosed for \$	PI	ease make che	ck pay	able to: l	Jnited Way	of Ventura C	ounty.	
Credit Card Type:	tercard	☐ Visa		America	n Express	☐ Disco	ver	
Credit Card #:								
xpiration Date:Secu		Securi	rity Code: Zip Code:					
Name on Card:								
Signature (required):						Date:		
Please invoice me								
Please return this sheet via m	nail or ema	ail to:						
UNITED WAY OF VENTUR				For m	ore informa	tion contact:		
ATTN: Vicki Raven			Vicki Raven					
702 County Square Drive, Ste 100 Ventura, CA 93003			VP Resource Development & Marketing Vicki.Raven@vcunitedway.org					

Thank you for your support in helping create a brighter Ventura County!

Send email to: Vicki.Raven@vcunitedway.org (Please referent **Spirit 2018** or **DOC 2018** in memo)

Phone: (805) 485-6288, Ext. 229