The deadline for sponsor recognition on printed materials is August 5, 2024.

# Healing Heights

An Evening of Empowerment

# **Sponsorship Packages** & Benefits

### Skyline Sponsor \$20,000

- Rooftop reception and heavy hors d'oeuvres for 8 quests
- Reserved seating
- 8 open bar wristbands
- 6 valet parking passes

### Pinnacle Partner \$10,000

- Rooftop reception and heavy hors d'oeuvres for 6 guests
- Reserved seating
- 6 open bar wristbands
- 4 valet parking passes

# **Radiant Benefactor \$5,000**

- Rooftop reception and heavy hors d'oeuvres for 4 guests
- 12 drink tickets
- 2 valet parking passes

# Luminary Leader \$2,500

- Rooftop reception and heavy hors d'oeuvres for 4 guests
- 8 drink tickets
- 2 valet parking passes

### Acknowledgement during the event

- Logo on event program & signage
- Acknowledgement during the event
- Dessert soirée
- Logo on event program & signage
- Logo/Link on website
- Dessert soirée
- Name on event program and signage
- Name on website
- Dessert soirée
- Name on event program and signage

Dessert soirée

- Logo/Link on website

Thursday, Sept. 26, 2024

Rooftop Garden located at Blatt, Beer & Table, North Downtown

- 4pm cocktails
- 5pm hors d'oeuvres

6:30pm dessert soirée

6pm remarks



Card #: \_\_\_\_\_\_ Security Code: \_\_\_\_\_\_

Billing Address: (if different from sponsor address above)

Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

Name on Card: \_\_\_\_\_

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- · 6:30pm dessert soirée

### Sponsor Information – Sponsor Levels – Sponsor/Company Name: Please select one: \$20,000 Skyline Sponsor (Name as you would like to be recognized in print) **□** \$10,000 Pinnacle Partner Address: \$5,000 Radiant Benefactor **\$2,500** Luminary Leader Please accept my donation of \$\_\_\_\_\_ City, State, ZIP: in lieu of a sponsorship Sponsor Benefits — **Reservation Contact:** Please select one: I WANT the benefits that come with my **Email:** sponsorship I DO NOT WANT the benefits that come with **my sponsorship** (no goods and services) Phone Number: I DO NOT WANT the benefits that come with my sponsorship and wish to donate my tickets to another worthy attendee Payment Information — Bill Me: This contribution is to remain anonymous (date to be billed) The cost of goods and services provided in exchange Check enclosed payable to RADIUS for your donation will be noted on a receipt mailed Credit Card (Visa, Mastercard, AmEx, Discover) to the reservation contact following the event.

Please return this form by August 5 to:
RADIUS
Attn: Development
5040 Grand Ave.
Omaha, NE 68104

Event registration information will be emailed upon receipt of Agreement.