



moving families forward

ACKERMAN INSTITUTE FOR THE FAMILY

Monday, October 24, 2016

I / We would like to support the Ackerman Institute for the Family and reserve the following:

TABLES:

___ \$50,000 **Family Benefactor**

- Your name in printed and online event material
- Two page print ad (spread) in event journal
- Above spread in Digital Tribute Journal (40 second on-screen hold)
- Table for 12 with premium placement

___ \$25,000 **Family Sponsor**

- Your name in printed and online event material
- Full page print ad in event journal
- Full page ad in Digital Tribute Journal (30 second on-screen hold)
- Table for 10 with superior placement

___ \$15,000 **Family Champion**

- Your name in printed and online event material
- Half page print ad in event journal
- Half page ad in Digital Tribute Journal (20 second on-screen hold)
- Table for 10

___ \$10,000 **Family Supporter**

- Your name in printed and online event material
- Half page ad in Digital Tribute Journal (10 second on-screen hold)
- Table for 10

TICKETS:

___ \$1,000 **Tribute Ticket(s)**

___ \$600 **Friend Ticket(s)**

CONTRIBUTION:

___ I / We cannot attend, but enclose a contribution of \$_____ .

JOURNAL: (Print and Digital opportunities)

___ Outside Back Cover ~ \$10,000
(Your digital ad shown for 10 second on-screen hold)

___ Half Page ~ \$1,000

___ Inside Cover ~ \$5,000
(Your digital ad shown for 5 second on-screen hold)

___ Quarter Page ~ \$500

___ Full Page ~ \$2,500
(Your digital ad shown for 5 second on-screen hold)

___ Business Card ~ \$300

Please list me/us as part of the Benefit Committee (minimum \$2,000 commitment required for listing).

PAYMENT:

Enclosed is a check for \$_____ for our package(s) / ticket(s).

Please make checks payable to Ackerman Institute for the Family, c/o Buckley Hall Events, 17-19 Marble Avenue, Pleasantville, NY 10570.

Please charge my ___ Visa ___ MasterCard ___ American Express

Card Number

Exp.

Security Code

Signature

NAME _____

(as you wish it to be listed in the invitation and printed program)

COMPANY _____

ADDRESS _____

CITY, STATE, ZIP _____

TELEPHONE _____ EMAIL _____

Contributions are fully tax-deductible. \$210 per ticket is not tax-deductible. Please return this form in the enclosed envelope or fax to (914) 579-1008. For further information, please contact Buckley Hall Events at (914) 579-1000 or email AckermanGala@BuckleyHallEvents.com.