



5th Annual:
CCNN Live
Media Excellence Awards
Saturday, April 21, 2018 at
Café Columbus

Sponsorship Opportunities

Company/Family Name: _____

Contact Person: _____

Address: _____

City/State: _____

Zip: _____

Phone: _____

Fax: _____

Email: _____

How did you hear about us? _____

Sponsor Signature: _____

Date _____

Please select amount:

_____ **\$5,000 Gold Sponsor**

Sponsor will be entitled to:

- Twelve (12) entry tickets to the event
- Logo/Name placement on CCNN Live's website
- Full Page recognition in the program
- Sponsor logo will be projected during the show
- Sponsor commercial spot will air during the show

_____ **\$3,000 Silver Sponsorship**

Sponsor will be entitled to:

- Ten (10) entry tickets to the event
- Logo/Name placement on CCNN Live's website
- Half Page recognition in the program
- Sponsor logo will be projected during the show

_____ **\$2,000 Category Sponsorship**

Sponsor will be entitled to:

- Six (6) entry tickets to the event
- Quarter-page ad in the event program
- Sponsor will be invited to present at the event. (optional)

_____ \$1,500 Bronze Sponsorship

Sponsor will be entitled to:

- Four (4) entry tickets to the event
- Quarter-page ad in the event program

_____ \$1,000 Benefactor Sponsorship

Sponsor will be entitled to:

- Sponsor logo projected throughout the event
- Quarter-page ad in the event program

_____ \$500 Supporting Sponsorship

Sponsor will be entitled to:

- Sponsor logo projected throughout the event

Advertisement Opportunities

- Full page ad \$1,000 _____
- Half page ad \$500 _____
- Quarter page ad \$250 _____

_____ Tickets and Tables

Tables can be purchased for \$1,000. Each table seats 10 guests. Please indicate number of tables you would like to purchase above.

****Continue to the next page for payment information please.**

Form of payment:

Please check one:

Check (payable to "Christopher Columbus High School"): _____

Visa: _____ MasterCard: _____ Cash: _____

Card No.: _____ Exp.: _____

Name on Card: _____ Signature: _____

Address: _____ City: _____ State: _____ Zip Code: _____

Telephone: _____ E-mail: _____

Please complete form and mail to:

CCNN Live, Christopher Columbus High School 3000 SW 87 Avenue Miami, Fl. 33165

****Please make check payable to "Christopher Columbus High School"**

Invitation Printing Deadline TBA Event Program Printing Deadline TBA