

Black Tie White Coat Ball

STARRING VILLAGE PEOPLE

Benefiting research and treatment of autism.

SPONSORSHIP PACKAGES

Presenting Sponsor \$50,000.00

Includes: 2 tables of 10 for dinner with premier seating (\$43,758.00 is tax deductible)
2 facing pages in the program book in a premier location
Limited admission to the VIP meet and greet with Village People
Prominent listing as a Presenting Sponsor in the program book*
Individualized recognition of sponsorship at event

Platinum Sponsor \$25,000.00

Includes: 2 tables of 10 for dinner with premier seating (\$18,758.00 is tax deductible)
2 full pages in the program book with premium placement
Limited admission to the VIP meet and greet with Village People
Listing as a Platinum Sponsor in the program book*

Gold Sponsor \$10,000.00

Includes: 1 table of 10 for dinner with preferred seating (\$ 6,879.00 is tax deductible)
1 full page in the program book
Limited admission to the VIP meet and greet with Village People
Listing as a Gold Sponsor in the program book

Silver Sponsor \$ 5,500.00

Includes: 1 table of 10 for dinner (\$ 3,717.00 is tax deductible)
Name listed in the program book

Patron \$ 550.00

Includes: Individual ticket including cocktails, dinner, and the show (\$262.00 is tax deductible)

*Confirmation must be received prior to final proof



DREXEL UNIVERSITY
COLLEGE OF MEDICINE

Suite 11484, 1601 Cherry Street • Philadelphia, PA 19102

Telephone: 215-255-7327 • Fax: 215-255-7301

Email: Melanie Pizzulo at mpizzulo@drexelmed.edu

Black Tie White Coat Ball

STARRING VILLAGE PEOPLE

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Event date: March 29, 2008

PROGRAM BOOK SPECIFICATIONS

Deadline Friday, February 22, 2008

Advertisement Sizes

Back Cover	7.5" x 9.5"	\$2,500
Inside Front Cover	7.5" x 9.5"	\$2,000
Inside Back Cover	7.5" x 9.5"	\$2,000
Full Page	7.5" x 9.5"	\$1,500
Half Page	7.5" x 4.75"	\$ 750

Camera Ready Art

Camera Ready art is black and white art that is clean and sized to fit (laser printer generated art is not camera ready).

Digital Files

Digital files can be supplied on 3 1/4" floppy, 100 MB or 250 MB Zip disc or CD Rom (email files?). Acceptable programs: Quark Xpress, Photoshop, Freehand or Illustrator. Ads created in Microsoft Word or Microsoft Publisher are not acceptable. Include all scans, art and photo files (tiff, eps or ai format). Photos should have a resolution of at least 300 dpi at final size. All fonts must be included.

Please send all program book advertisements to:

Melanie Pizzulo
Suite 11484, 1601 Cherry Street
Philadelphia, PA 19102
215-255-7327
Email: mpizzulo@drexelmed.edu

DEADLINE FOR ALL PROGRAM BOOK ADVERTISEMENTS IS FEBRUARY 22, 2008



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SPONSORSHIP FORM

Event date: March 29, 2008

Contact Name _____

Company/Organization Name _____

Street _____

City _____ State _____ Zip _____

Telephone _____ Fax _____ Email _____

Solicited By _____

SPONSORSHIPS

- \$50,000 Presenting Sponsor** includes 2 tables of 10 for dinner with premier seating + 2 facing pages in the program book in a premier location + limited admission to the VIP meet and greet with Village People*** + prominent listing as a Presenting Sponsor in the program book* + recognition at the event will be individualized
- \$25,000 Platinum Sponsor** includes 2 tables of 10 for dinner with premier seating + 1 full page in the program book** with listing as a Platinum Sponsor in the program book + limited admission to the VIP meet and greet with Village People***
- \$10,000 Gold Sponsor** includes 1 table of 10 for dinner with preferred seating + 1 full page in the program book** + limited admission to the VIP meet and greet with Village People*** + listing in the program book as a Gold Sponsor
- \$5,500 Silver Sponsor** includes 1 table of 10 for dinner + name listed in the program book
- \$550 Patron** _____ seat(s) at \$550 each. Each ticket includes cocktails, dinner and the concert
- I cannot attend but would like to make a contribution in the amount of \$ _____

* Confirmation must be received prior to final proof

** Gold and Platinum sponsors will be sent a Program Book Specification Sheet. Please return your completed program insertion by Friday, February 22, 2008

***Based on the discretion of the entertainers

Please bill my credit card Visa Mastercard AMEX Discover

Cardholder Name _____

Card Number _____ Expiration Date _____

Please make checks payable to: **Drexel University College of Medicine**



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