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Changing Lives Gala

Capital Community College | Centinel Hill Hall | Wednesday April 20, 2016 | 5:30-9 PM

RESPONSE FORM

Name _____

Company/Organization _____

Address _____

Town _____ State _____ Zip Code _____

Telephone _____ Email _____

Sponsorship Confirmation

_____ Campus \$15,000
 _____ Centinel Hill Hall \$10,000
 _____ Welcome Center \$5,000
 _____ Benefactor \$2,500
 _____ Bar & Music \$1,200

Sponsor Benefits
 Table(s) of 10/VIP Seating
 College Media Acknowledgments
 Advertising in Gala Journal
 Campus & Message Board Recognition

Reservations

_____ Table of 10 \$1,000
 _____ Individual tickets—please reserve _____ seat(s) at \$100 each
 _____ I/We cannot attend but have enclosed a donation in the amount of \$_____

Journal Advertising

_____ Full Page @ \$300 (7" wide x 9 3/8" long) _____ Half Page @ \$150 (7" wide x 4 5/8" long) _____ Quarter Page @ \$100

Sponsors and advertisers are asked to provide a company/organization logo, pdf advertisement and a list of attendees by 4/8/16

Methods of Payment

Make checks payable to Capital Community College Foundation. Mail to: Capital Community College Advancement Office 950 Main Street, Hartford, CT 06103. Contact: John McNamara Telephone: 860-906-5102 Fax: 860-906-5115 Email: CA-Foundation@capitalcc.edu

_____ **Check is enclosed.** Make checks payable to Capital Community College Foundation

_____ **Please charge my credit card** for this amount: \$_____ _____ Visa _____ Master Card

_____ Card Number _____ Expiration Date _____ Sec. Code _____

_____ Signature _____ Today's date _____

Contributions are tax-deductible to the extent allowed by law.

