

RSVP & Rates for Tickets

Please complete for Gala Tickets and return with your payment and RSVP in the enclosed envelope. Please RSVP by February 9th

RSVP Information

Name: _____ Telephone: _____

Address: _____

City, State, Zip: _____

Email: _____

Tickets

_____ Number of Tickets @ \$75 each.....\$ _____

_____ Number of Tickets @ \$750 per table (10 Seats).....\$ _____

_____ Golden VIP Tickets @ \$2500 per table (10 Seats champagne toast and
and commemorative medallion).....\$ _____

Names of Attendees for Tickets

_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

Check Enclosed \$ _____

Please make checks payable to:
NY District Kiwanis Foundation/50th Gala 9020 Kiwanis Road, Taberg, NY 13471

Card Payment Info

Name as it appears on card: _____

Card #: _____

Expiration Date: _____ 3 or 4 Digit CVV Code: _____ Billing Zip Code: _____

50gala@kampkiwanis.org

Ad & Sponsorship Information

Please complete for Gala Tickets, ads or sponsorships and return with your payment and RSVP in the enclosed envelope. Please RSVP by February 9th

Journal Ads

- 1/2 Page (5" H x 7" W).....\$90
- Full Page (9 1/2" H x 7" W).....\$150
- Gold Page (9 1/2" H x 7" W).....\$250
- Inside Front Cover (9 1/2" H x 7" W).....\$2000
- Inside Back Cover (9 1/2" H x 7" W).....\$1500
- Outside Back Cover (9 1/2" H x 7" W).....\$2500

The undersigned hereby agrees to take _____ page ad in the Anniversary Gala Ad Journal and agrees to pay the sum of \$_____

Name: _____

Address: _____

Email: _____

Signature: _____

Check Enclosed payable to NY District Kiwanis Foundation/50th Gala

Credit Card - Card #: _____

Expiration Date: _____ CVV: _____ Billing Zip Code: _____

Return Payment and Ad Copy to:

**Kamp Kiwanis – 50th Anniversary Gala 9020 Kiwanis Road, Taberg, NY 13471
315-336-4568**

Sponsorships

EVENT SPONSOR
\$10,000

COCKTAIL SPONSOR
\$5,000

VIDEO SPONSOR
\$3,000

DÉCOR SPONSOR
\$2,750

PHOTOGRAPHY SPONSOR
\$2,500

MUSIC SPONSOR
\$1,500

PHOTO BOOTH
2,000

50gala@kampkiwanis.org