

19th ANNUAL JEFFERSON

GA	DECEMBER 7, 2021 V Jefferson.ed						
Sponsorship	Champion Sponsor \$125,000	Premier Sponsor \$100,000	Executive Sponsor \$50,000	Chair Sponsor \$25,000	Vice Chair Sponsor \$15,000	Benefactor Sponsor \$10,000	Partner Sponsor \$5,000
Opportunities	(\$121,400 is tax deductible)	(\$96,700 is tax deductible)	(\$48,200 is tax deductible)	(\$23,200 is tax deductible)	(\$13,200 is tax deductible)	(\$8,500 is tax deductible)	(\$4,100 is tax deductible)
Recognition during virtual Gala by emcee and on screen	•	A	A				
Name listed on Gala website and digital materials	A	A	A	A	A	A	A
Ad in printed and digital program book (if received by Thursday, November 4)	Full-page	Full-page	Full-page	Full-page	Half-page	Half-page	
Enjoy healthy and delicious three-course dinner delivered to you and your guests' doors (redeemable in the tri-state area)	20 Meals	20 Meals	10 Meals	10 Meals	10 Meals	8 Meals	6 Meals

For information on purchasing meal(s), please visit Jefferson.edu/Gala or email the Office of Special Events at events@jefferson.edu.

Please type or print all information exactly as it should appear on event and recognition materials. Return completed form by Thursday, November 4, 2021.

Sponsorship Levels (Please check	one)					
☐ Champion Sponsor — \$125,000 (\$121,400 is tax deductible)	☐ Executive Chair Spo (\$48,200 is tax dedu		☐ Vice Chair Sponsor — \$15,000 (\$13,200 is tax deductible)			
☐ Premier Sponsor — \$100,000 (\$96,700 is tax deductible)	☐ Chair Sponsor – \$25 (\$23,200 is tax dedu		☐ Benefactor Sponsor – \$10,000 (\$8,500 is tax deductible)			
			□ Partner Sponsor – \$5,000 (\$4,100 is tax deductible)			
Contact Information						
Preferred recognition name for program b	ook and event screens:					
Contact Name:						
☐ Corporate ☐ Personal Company/O	rganization:					
Address:						
City:		State:	Zip:			
Phone Number:		Fax:				
Email Address:						
Additional Options						
☐ I/we would like to purchase a virtual past for two – \$600 (\$450 is tax deductible)	ss with dinner	Form completed by:				
Includes dinner for two delivered to one lo	ocation	Phone (day):				
☐ I/we would like to waive all benefits and		☐ Check Enclosed (Please make checks payable to Jefferson)				
to JeffSecure, which helps food-insecure making the sponsorship fully tax deductible		☐ Credit Card \$				
		☐ American Express ☐ Visa ☐ Mastercard ☐ Discover				
☐ I/we would like to waive all benefits and Jefferson's Specialty Care Pavilion, making		☐ Other:				
tax deductible		Cardholder Name:				
☐ I/we cannot attend the event but would contribution in the amount of \$	like to make a	Credit Card Number:				
		Expiration Date: Security Code:				
☐ I/we would like to purchase an additional advertisement	al digital	Billing Address (if different):				
☐ Double your impact with a company ma ☐ Matching gift form enclosed ☐ Matching gift form to be sent la		Signature:				

To sponsor the 19th Annual Jefferson Gala, please visit Jefferson.edu/Gala or return form to

19th Annual Jefferson GalaOffice of Institutional Advancement 125 S. 9th St., Suite 600
Philadelphia, PA 19107

For more information or questions about sponsorship opportunities, please contact Jennifer Miller Gobrecht at events@jefferson.edu or 215-955-9100.

