



## Fourth Annual HomeWord Fall Benefit

### Underwriting/Table Sponsorship Opportunities

Name (as it will appear in program): \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

- Platinum Sponsor - \$25,000**  
Includes 1 or 2 tables of 10 at the Benefit (your choice) and full page ad in program, if desired
- Diamond Sponsor - \$15,000**  
Includes table of 10 at the Benefit and full page ad in program, if desired
- Gold Sponsor - \$10,000**  
Includes 8 seats to attend the Benefit and full page ad in program, if desired
- Ruby Sponsor - \$5,000**  
Includes 6 seats to attend the Benefit and half page ad in program, if desired
- Silver Sponsor - \$2,500**  
Includes 4 seats to attend the Benefit and 1/4 page ad in program, if desired
- Table Sponsor - \$1,500**  
I would like to sponsor \_\_\_\_\_ table(s) of 10 at the Benefit

**Yes**, I would like to place an ad in the program.  
Ad deadline is September 30<sup>th</sup>.

I would like help with my ad, please contact me.

I have attached my ad copy to this form.

I will send my ad copy in at a later date, but before September 30.

**Ad Ideas:** business, family, wishing Jim & HomeWord well, congratulate Bob Shank

**No** thank you, I would not like to place an ad.

I am unable to attend but I would like to be a sponsor.  
Please accept my donation of: \$\_\_\_\_\_



Enclosed is my **Check** made payable to HomeWord for: \$ \_\_\_\_\_

Please charge my **Credit Card** for the amount of: \$ \_\_\_\_\_

**Credit Card Information**

<input type="checkbox"/> Visa	<input type="checkbox"/> MasterCard	<input type="checkbox"/> Amex	<input type="checkbox"/> Discover
Card Number: _____		Exp. _____ / _____	
Name as it appears on the Card: _____			
Cardholder's Signature: _____		CVN# _____	
Credit Card Billing Address if different than address on front:			
Address: _____			
City: _____		State: _____	Zip: _____

**Guest List**

- |           |           |
|-----------|-----------|
| 1. _____  | 11. _____ |
| 2. _____  | 12. _____ |
| 3. _____  | 13. _____ |
| 4. _____  | 14. _____ |
| 5. _____  | 15. _____ |
| 6. _____  | 16. _____ |
| 7. _____  | 17. _____ |
| 8. _____  | 18. _____ |
| 9. _____  | 19. _____ |
| 10. _____ | 20. _____ |

I will submit my Guest List at a later date.

**Please return this form by October 15**

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