



SPONSORSHIP FORM

GUARDIAN SPONSOR: • **\$25,000** Branded one-minute testimonial video • Name & logo recognition on all printed materials & full-page ad in program • Name & logo on table signage • Press release recognition (optional) • Podium recognition by keynote speaker • Premier seating • Special gifts for table guests

PROTECTOR SPONSOR: • **\$20,000** Name & logo recognition on all printed materials & full page ad in program • Name & logo on table signage • Press release recognition (optional) • Podium recognition by keynote speaker • Preferred seating • Special gifts for table guests

DEFENDER SPONSOR: • **\$15,000** Name & logo recognition on all printed materials & 1/2 page ad in program • Name & logo on table signage • Press release recognition (optional) • Preferred seating • Special gifts for table guests

ADVOCATE SPONSOR: • **\$5,000** Name & logo recognition on all printed materials • Name & logo on table signage • Preferred seating

KEEPER SPONSOR: • **\$2,500** Name recognition on all printed materials • Name on table signage

CUSTODIAN SPONSOR: • **\$1,500** Name recognition on all printed materials

PATRON (INDIVIDUAL TICKET): \$150

ORGANIZATION/COMPANY NAME: _____

NAME: _____ EMAIL: _____

MAILING ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

CHECK ENCLOSED (PAYABLE TO GUARDIAN HOUSE) CREDIT CARD VISA/MASTERCARD

CARDHOLDER NAME: _____ CREDIT CARD #: _____

EXP: _____ SECURITY CODE: _____

BILLING ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

TOTAL AMOUNT: \$ _____

SPONSORSHIP LEVEL:

GUARDIAN \$25,000 (TABLE OF 8) **PROTECTOR** \$20,000 (TABLE OF 8) **DEFENDER** \$15,000 (TABLE OF 8)

ADVOCATE \$5,000 (TABLE OF 8) **KEEPER** \$2,500 (TABLE OF 8) **CUSTODIAN** \$1,500 (TABLE OF 8)

PATRON \$150 (INDIVIDUAL TICKET)

I'M UNABLE TO ATTEND, BUT I ENCLOSE MY CONTRIBUTION OF \$ _____

I WOULD LIKE TO DONATE AN ITEM TO THE SILENT AUCTION: _____

(turn page over)

PLEASE SUBMIT COMPLETED FORM AND PAYMENT BY:

MARCH 13, 2020 TO BE INCLUDED ON THE INVITATION OR **APRIL 30, 2020** TO BE INCLUDED IN THE EVENT PROGRAM.

SEND FORM & PAYMENT TO:

GUARDIAN HOUSE | ATTN: SONIA LOPEZ | 1818 SAN PEDRO, SAN ANTONIO, TX 78212

PREFERRED TABLE NAME FOR PROGRAM:

GUEST NAMES (please place a “(V)” next to name if vegetarian meal is preferred):

- | | |
|----------|----------|
| 1. _____ | 5. _____ |
| 2. _____ | 6. _____ |
| 3. _____ | 7. _____ |
| 4. _____ | 8. _____ |

Your support allows us to provide over 2,100 children and parents with these critical services:

- Parenting classes specifically adapted to the needs of high-risk families
- Mental Health counseling for individuals and families
- Kids Play Therapy
- Family Reunification to bring together children estranged from parents
- Monitored Kids Exchanges and Supervised Visitations of high-conflict divorce

FOR MORE INFORMATION, EMAIL GIVE@GUARDIANHOUSE.ORG

**GUARDIAN HOUSE IS A 501(C)3 NONPROFIT.
YOUR SPONSORSHIP/DONATION IS TAX DEDUCTIBLE TO THE EXTENT ALLOWED BY LAW.**



1818 San Pedro Avenue
San Antonio, TX 78212
210.733.3349
www.GuardianHouse.org
give@GuardianHouse.org