



Honoring Alec Call and Bryan Johns  
Advocacy Award: Sherry Goldman

2021 Sponsorship Opportunities

Title Sponsor \$100,000

Please contact Allison Jackson at 310-550-7719  
allison@allisonjacksonco.com for additional information.

Presenting Sponsor \$50,000

Table seating for 10 on floor level; Two-Page Spread  
in tribute journal; signage in theater's front lobby;  
acknowledgement by host and NBCC President  
during opening remarks; Presenting Sponsor  
recognition in all media materials.

Benefactor \$25,000

Table seating for 8 on floor level; signage in theater's  
front lobby; Gold Full-Page Ad in tribute journal;  
acknowledgment by host and NBCC President during  
opening remarks.

Premier \$10,000

Table seating for 6 on floor level; Full-Page Ad in  
tribute journal.

Patron \$7,500

Private booth for 6 in rear of floor level;  
Half-Page Ad in tribute journal.

Champion \$5,000

Table seating for 4 on floor level; Quarter-Page Ad  
in tribute journal.

Friend Ticket \$1,000

Floor seating (*limited availability*).

Balcony Ticket \$300

Sorry, I/we cannot attend

Enclosed is my/our contribution of \$ \_\_\_\_\_  
payable to National Breast Cancer Coalition Fund.

Tribute Journal Ads:

- Platinum Full-Page: \$10,000  Gold Full-Page: \$5,000  Full-Page: \$2,500  Half-Page: \$1,500  Quarter-Page: \$750

**Art Submission Deadline: September 23, 2021.**

**Electronic files preferred; please email ad copy or artwork to [sgoins@stopbreastcancer.org](mailto:sgoins@stopbreastcancer.org)**

Full-Page: 6 1/2" x 8" | Half-Page: 6 1/2" x 4 1/8" | Quarter-Page: 3 1/8" x 4 1/8" (live area, non-bleed). All ads are black & white.

Name/Company \_\_\_\_\_

To Be Listed As \_\_\_\_\_

Contact Person \_\_\_\_\_

Address \_\_\_\_\_

City, State & Zip \_\_\_\_\_

Phone \_\_\_\_\_ Fax \_\_\_\_\_

E-mail Address \_\_\_\_\_

Please make checks payable to National Breast Cancer  
Coalition Fund or indicate credit card information:

Visa  MasterCard  American Express  Discover

Credit Card Number \_\_\_\_\_

Expiration Date \_\_\_\_/\_\_\_\_/\_\_\_\_ CVV/Security Code \_\_\_\_\_

Name on Card \_\_\_\_\_

Signature \_\_\_\_\_