



Explore the Talent, Secure the Legacy



DeMatha Catholic High School  
MUSIC DEPARTMENT

Phone: 240-764-2266, Fax: 240-764-2275

www.dematha.org

## EVENT SPONSORSHIP & ADVERTISING AGREEMENT FOR THE 2018-2019 CONCERT SEASON

**Instructions:** Print or type clearly. Retain a copy for your records. Return completed form with ad artwork (if appropriate) to: *DeMatha Music Department Donations \* 4313 Madison Street \* Hyattsville, MD 20781*

Donor/Business Name: \_\_\_\_\_ Contact Name: \_\_\_\_\_

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

Work Phone: \_\_\_\_\_ Home Phone: \_\_\_\_\_ E-mail: \_\_\_\_\_

Donor Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Print Signature Name: \_\_\_\_\_

*(Your signature certifies that you have received nothing of value in exchange for this donation.)*

**Any donation (sponsorship or advertiser) of \$500+ will receive recognition on the DeMatha Music 5K T-shirt.**

**Event Sponsor** \$ \_\_\_\_\_

Includes listing in the event program at one of the following contributor levels:

*Mezzo Forte:* \$50-\$249      *Forte:* \$250-\$499      *Fortissimo:* \$500 or more

**Donations of \$1,000 or higher please contact the Music Department or Kaleidoscope Chair for Special Recognition such as naming rights for underwriting Catering Costs, or Bar, Lighting, etc.**

**Event Advertiser** \$ \_\_\_\_\_

Includes advertising in the event program (8½ x 11” booklet) as follows:

Inside Front Cover - \$500	Inside Back Cover - \$400 (reserved)	Back Cover - \$700
Two Page Spread-\$500	Full Page - \$275	1/2 Page - \$200
1/4 Page - \$125	1/8 page (Business Card) - \$50	Student Message - \$40

*[For advertisements, please remember to attach camera-ready artwork or email high-resolution JPEG or PDF to dcurry@dematha.org. A template for sizing can be provided if needed. We cannot accept Word documents.]*

**DEADLINE FOR INCLUSION IN PROGRAM: September 28**

**TOTAL DONATION:** \$ \_\_\_\_\_

[Checks should be made out to “DeMatha High School Band”]

**Donation of NON-CASH Items:** Item: \_\_\_\_\_ Value: \_\_\_\_\_

Donating items for raffle such as gift baskets or to provide a service, vacation experience or other non-cash item?

Please indicate item and approximate value and the Music Department or a member of the Kaleidoscope

Committee will contact you to discuss details of your donation.

Donor Name Should Appear As (if different than above): \_\_\_\_\_

*(for program listing and other printed material)*

Donor Relationship to DeMatha:     current family     alumnus     faculty     friend

**SOLICITED BY**

**Name:** \_\_\_\_\_

**Phone:** \_\_\_\_\_

*For Office Use Only*

*Contribution Received:* \_\_\_\_\_

*Complete:* \_\_\_\_\_