

# 30TH ANNIVERSARY CELEBRATION Sponsorship Form



**DISABILITY RIGHTS NEW JERSEY**  
ADVANCING JUSTICE. ADVOCATING INCLUSION.

Thank you for your support and interest in sponsoring our 30th Anniversary Celebration. Please complete this form and return to: [dcaro@disabilityrightsnj.org](mailto:dcaro@disabilityrightsnj.org) along with high-resolution materials by **9/20**.

## SPONSOR LEVELS:

### Platinum Sponsor: \$5000

- Table of 10 Reserved with 10 Tickets
- Company name/logo featured on our home page and event page of website, social media before and after event, displayed at event, and featured in event program.

### Gold Sponsor: \$2,500

- 4 Tickets
- Company name/logo featured on event page of website, social media, displayed at event, and program listing.

### Silver Sponsor: \$1,000

- 2 Tickets
- Company name/logo featured on event page, social media, and program listing.

### Bronze Sponsor: \$750

- 1 Ticket
- Company name/logo featured on event page of website and program listing.

## AD JOURNAL:

*Camera-ready ad preferred in high resolution PNG by September 20th*

### Full Page Ad: \$500

5.5 x 8.5 Inches

### Half Page Ad: \$250

5.5 x 4.25 Inches

### Quarter Page Ad: \$125

2.75 x 4.25 Inches

### Listing Only: \$50

CONTACT NAME: \_\_\_\_\_

COMPANY/ORGANIZATION NAME: \_\_\_\_\_

BUSINESS ADDRESS: \_\_\_\_\_

PHONE: \_\_\_\_\_ EMAIL: \_\_\_\_\_

TOTAL \$ AMOUNT DUE: \_\_\_\_\_

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

Exp Date: \_\_\_\_\_ CVV: \_\_\_\_\_ Billing Zip: \_\_\_\_\_

Check Check Number: \_\_\_\_\_

*Checks should be mailed to address below with attention 30th Celebration*

OFFICE USE ONLY STAFF/VOLUNTEER NAME: \_\_\_\_\_