

SPONSORSHIPS

- Believer’s Circle - \$10,000
- Archangel - \$5,000
- Guardian Angel - \$2,500
- Beverage Underwriter - \$5,000
- Printing Underwriter - \$3,000
- Good Shepherd Table Sponsorship - \$3,000

PROGRAM BOOK ADVERTISING

- One Page Advertiser - \$1,000
- Half Page Advertiser - \$500
- Quarter Page Advertiser - \$250
- Tribute Advertiser (quarter page) - \$250
- Business Card Advertiser - \$150
- Patron Catholic School Listing - \$100



SPRING BENEFIT
MARCH 16, 2019

Name to be listed in sponsorship lists: _____

Name(s) to be listed for tributes ads: _____

I will submit my logo and/or digital files by February 23, 2019. Files and forms can be submitted to: info@ccse-maryland.org.

Please reserve _____ seats at \$225 per person/\$200 by February 23, 2019 \$ _____

Please reserve _____ junior seats (children’s meal; under 15) at \$100 per person \$ _____

I wish to sponsor a Priest/Sister, Principal, or Teacher \$ _____

Basket Raffle Tickets: 100 for \$200 25 for \$100 # _____ tickets at \$10 each \$ _____

I cannot attend but wish to make a contribution to CCSE \$ _____

Total: \$ _____

Name: _____

Street: _____

City: _____ State: _____ Zip: _____

Phone: _____ Email: _____

AE/Visa/MC # _____ Verification Code (3 digit): _____ Expiration (mm/yy): _____

Check Enclosed _____

Please register this credit card for Express Check-Out at the Benefit.

Please make checks payable to CCSE, Inc. Return to 10400 Connecticut Avenue, Suite 603 | Kensington, MD 20895

No tickets will be issued; list guest information on the reverse of this card. Reservations must be made in advance.

Guest Information (All names required for security purposes.)

Name: _____

Street: _____

City: _____ State: _____ Zip: _____

Name: _____

Street: _____

City: _____ State: _____ Zip: _____

Name: _____

Street: _____

City: _____ State: _____ Zip: _____

Name: _____

Street: _____

City: _____ State: _____ Zip: _____

Name: _____

Street: _____

City: _____ State: _____ Zip: _____

Name: _____

Street: _____

City: _____ State: _____ Zip: _____

Questions? Contact CCSE at 301-933-8844 x 102 or development@ccse-maryland.org

The non-deductible portion of each ticket is \$170