

FRIENDS



OF THE CHILDREN

Friends of the Children-Boston

7th Annual Friend Raiser

Thursday, May 17, 2012

Your sponsorship will directly benefit the 116 children *Friends of the Children-Boston* serves. *Friends of the Children-Boston* creates generational change by engaging children from high-risk communities in 12 years of transformative mentoring relationships.

\$25,000 - Leader

- Name and logo featured on invitation
- Name and logo featured as a Leader in printed program book
- Name and logo featured as a Leader on *Friends-Boston* website
- Name and logo featured as a Leader on the big screen and signage at live event
- Mention as Leader in all related press releases
- Tickets for 20 guests

\$10,000 - Partner

- Name and logo featured as a Partner in printed program book
- Name and logo featured as a Partner on *Friends-Boston* website
- Name and logo featured as a Partner on the big screen and signage at live event
- Tickets for 15 guests

\$7,500 - Mentor

- Name and logo featured as a Mentor in printed program book
- Name and logo featured as a Mentor on *Friends-Boston* website
- Name and logo featured as a Mentor on the big screen and signage at live event
- Tickets for 12 guests

\$5,000 - Friend

- Name featured as a Friend in printed program book
- Name featured as a Friend on *Friends-Boston* website
- Name featured as a Friend on the big screen and signage at live event
- Tickets for 10 guests

\$2,500 - Host

- Host friends at your table and enjoy a fun and inspiring evening to benefit *Friends-Boston*
- Tickets for 10 guests



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Friends of the Children-Boston 7th Annual Friend Raiser Sponsorship Form

CONTACT INFORMATION:

Name/Company (exactly as it should appear on all printed materials): _____

Address: _____

City/State/Zip: _____

Telephone: _____ Fax: _____

E-mail: _____

I would like to become a Sponsor for the Seventh Annual Friend Raiser:

- Leader** - \$25,000
- Partner** - \$10,000
- Mentor** - \$7,500
- Friend** - \$5,000
- Host** - \$2,500

PAYMENT:

Check enclosed (Please make checks payable to *Friends of the Children-Boston*)

I want to give using my credit card:

Card type: _____ Amount \$: _____

Card number: _____ Expiration Date: _____

Name on Card: _____

Please return completed form and payment to:

Friends of the Children-Boston
555 Amory Street
Boston, MA 02130

You may also donate online at www.friendsofthechildrenboston.org

If you have questions or for additional information about *Friends of the Children-Boston*, please contact Caitlin Day-Lewis, Development Director, at 617-983-3682 or caitlin@friendsboston.org. **Thank you for your support!**

Visit our website at www.friendsofthechildrenboston.org