

BALLET AT BUCKO'S

black & white ball

MAY 9, 2025 | AN ENCHANTING EVENING UNDER THE STARS
SPONSORSHIP OPPORTUNITIES FOR BALLET AT BUCKO'S

SPONSORSHIP LEVELS

\$10,000 - PRESENTING SPONSOR

- ❖ 20 tickets to event (Two Front/Center Tables)
- ❖ Full color page ad in 2025/26 Ballet Spartanburg Season Program (\$800 value)*
- ❖ Corps de Ballet membership (\$250 value)*
- ❖ Business name/logo on all printed materials (Invitation, menu, poster)
- ❖ Business name on website
- ❖ Acknowledgement the evening of event
- ❖ \$5350 tax deductible gift

\$5000 - SPONSOR

- ❖ 10 tickets to event (Front Row)
- ❖ Full color page ad in 2025/26 Ballet Spartanburg Season Program (\$800 value)*
- ❖ Corps de Ballet membership (\$250 value)*
- ❖ Business name/logo on all printed materials (Invitation, menu, poster)
- ❖ Business name on website
- ❖ Acknowledgement the evening of event
- ❖ \$1950 tax deductible gift

* Deadline for sponsorship level opportunity
March 29, 2025

\$2500 - SPONSOR

- ❖ 6 tickets to event (Front Row)
- ❖ Full color page ad in 2025/26 Ballet Spartanburg Season Program (\$800 value)*
- ❖ Business name/logo on all printed materials (Invitation, menu, poster)
- ❖ Business name on website
- ❖ Acknowledgement the evening of event
- ❖ \$620 tax deductible gift

\$1250 - SPONSOR

- ❖ 4 tickets to the event (First or Second Row)
- ❖ Business name/logo on all printed materials (Invitation, menu, poster)
- ❖ Business name on website
- ❖ Acknowledgement the evening of event
- ❖ \$530 tax deductible gift

\$500 - SPONSOR

- ❖ 2 tickets to the event (First or Second Row)
- ❖ Business name/logo on all printed materials (Invitation, menu, poster)
- ❖ Business name on website
- ❖ Acknowledgement the evening of event
- ❖ \$140 tax deductible gift

— YOUR SPONSORSHIP IS YOUR RESERVATION —

NAME/BUSINESS (how you would like to be listed)

PHONE

EMAIL

ADDRESS

CITY

STATE

ZIP

SPONSORSHIP LEVEL : \$10,000 \$5000 \$2500 \$1250 \$500

I/We cannot attend. Please accept this gift to support the evening _____

PAYMENT INFORMATION: INVOICE ME CHECK CREDIT CARD

NAME ON CARD

CC NUMBER

CVV

EXP.

ZIP