



# PROGRAM BOOK SPONSORSHIP FORM

## *Celebrating 20 Years of Agapi*

**Saturday, December 10, 2022**  
**Westin O'Hare Hotel, Rosemont, Illinois**

***I will support the Centre by helping to underwrite the GALA:***

### **Grand Benefactor - \$25,000**

- Three complimentary tables of ten at Gala dinner
- Photo *Meet and Greet* with Giorgos Daskalidis
- VIP seating at Gala dinner
- Special recognition from the podium as "Grand Benefactor"
- Full-page color spread in event program book and on our social media

### **Platinum Benefactor - \$15,000**

- Two complimentary tables of ten at Gala dinner
- Photo *Meet and Greet* with Giorgos Daskalidis
- VIP seating at Gala dinner
- Special recognition from the podium as "Platinum Benefactor"
- Full-page color spread in event program book (listing and personal message) and on our social media

### **Gold Benefactor - \$10,000**

- One complimentary table of ten at Gala dinner
- VIP seating at Gala dinner
- Special recognition from the podium as "Gold Benefactor"
- Full-page color spread in event program book (listing and personal message) and on our social media

### **Silver - \$5,000**

- Five complimentary tickets at Gala dinner
- Prominent seating at Gala dinner
- Special recognition from the podium as "Silver Benefactor"
- Full-page color spread in event program book (listing and personal message)

### **Bronze - \$2,500**

- Two complimentary tickets at Gala dinner
- Half-page color listing in event program book

### **Patron - \$1,000**

- Listing and personal message in event program book

### **Supporter - \$\_\_\_\_\_**

- Listing in event program book

**Please submit forms and checks payable to:**

**Greek American Health Service Foundation "GAHSF" by November 28, 2022.**

**\*Please print your name as you wish it to appear in the listing of the Program Book.**

\*NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_

PHONE NO. \_\_\_\_\_ RECEIVED \$ \_\_\_\_\_ CHECK # \_\_\_\_\_ DATE: \_\_\_\_\_

*Please charge my credit card:*

\_\_\_\_\_  
CREDIT CARD #

\_\_\_\_\_  
EXP. DATE

\_\_\_\_\_  
3-DIGIT SEC. CODE

Please use the enclosed envelope or MAIL TO:

**Patricia Gerbanas**  
**Greek American Health Service Foundation**  
201 Strong Street, Suite 9  
Wheeling, Illinois 60090