



CELEBRITY SPOTLIGHT

HCA's premier fundraising concert featuring **John Oates** | September 9

On The Arts

SPONSOR OPPORTUNITIES

SPONSOR INFORMATION:

CONTACT NAME: _____

BILLING ADDRESS: _____ CITY: _____ STATE: _____ ZIP: _____

PHONE: _____ EMAIL: _____

ADVOCATE \$5,000

- Four VIP tickets for members of your team which includes food, drink, premiere seats and private sound check/meet and greet with John Oats
- Your company logo projected on a screen prior to concert
- Your company name and logo on all marketing materials for the event both in print and online
- Full-page color ad and in all HCA programs for 12-months
- Listing as a Partner in the Arts on HCA website sponsorship page and link to website
- Invitation to corporate partner breakfast at HCA and founders dinner

SUPPORTER \$2,500

- Two VIP tickets for members of your team which includes food, drink, premiere seats and private sound check/meet and greet with John Oats
- Your company logo projected on a screen
- Your company name on all marketing materials for the concert in print and online
- Full page color ad in concert program and in all event programs for one year

SUPPORTER \$2,500 continued...

- Your company name and logo listed in our special event sponsorship section of the program
- Listing as Partner in the Arts event on HCA sponsorship page
- Invitation to annual corporate partner breakfast

BENEFACTOR \$1,000

- Half page color ad in concert program and in all event programs for one year
- Your company name and logo listed in our special event sponsorship section of the program
- Listed as Partner in the Arts on HCA sponsorship page
- Invitation to annual corporate partner breakfast

Celebrity Spotlight Program Advertising:

Full Page: 5" width X 7.75" height

Half Page: 5" width X 3.75" height

Quarter Page: 5" width X 1.25" height

Please submit ads in PDF, JPEG or PNG format. If you do not have an ad available contact the HCA for free ad design assistance.

REV 5.3.2023

PAYMENT INFORMATION:

Advocate Supporter Benefactor Sponsor

Check Enclosed (Payable to Hopkinton Center for the Arts) CHARGE MY CARD: Master Card Visa American Express

NAME ON CARD: _____ EXPIRATION DATE: _____

CARD NUMBER: _____ SECURITY CODE: _____

BILLING ADDRESS ON CARD: SAME AS ABOVE

PLEASE MAIL COMPLETED SPONSORSHIP FORM / CHECK AND OR PAYMENT INFORMATION TO:

Hopkinton Center for the Arts • 98 Hayden Rowe Street • Hopkinton, MA 01748

For more information or questions please contact Kelly Grill or Maureen Belger at 508.435.9222

email: Kelly@hopartscenter.org Maureen@hopartscenter.org