



A LESTER & SUE SMITH PRODUCTION  
BENEFITING TEXAS CHILDREN'S HOSPITAL

## SPONSORSHIP OPPORTUNITIES

### **\$100,000 | *I Will Survive***

- ★ Two premier reserved tables of 10 on floor level for 20 guests
- ★ Two invitations to the Motown Underwriter Reception on September 12
- ★ 20 invitations to exclusive VIP reception
- ★ 10 VIP valet parking passes
- ★ Invitation to the Motown Children's Party
- ★ Recognition on video screens
- ★ Name listing in all printed materials and on event website
- ★ Name listing on donor wall recognizing supporters of Texas Children's *Promise Campaign*
- ★ Recognition opportunity in Legacy Tower
- ★ Commemorative gift

*Estimated fair market value: \$4,100*

### **\$75,000 | *You Gotta Believe***

- ★ One premier reserved table on floor level for 12 guests
- ★ Two invitations to the Motown Underwriter Reception on September 12
- ★ 12 invitations to exclusive VIP reception
- ★ 6 VIP valet parking passes
- ★ Invitation to the Motown Children's Party
- ★ Recognition on video screens
- ★ Name listing in all printed materials and on event website
- ★ Recognition opportunity in Legacy Tower
- ★ Commemorative gift

*Estimated fair market value: \$2,500*

### **\$50,000 | *Celebrate***

- ★ One reserved table on floor level for 10 guests
- ★ Two invitations to the Motown Underwriter Reception on September 12
- ★ 10 invitations to exclusive VIP reception
- ★ 5 VIP valet parking passes
- ★ Invitation to the Motown Children's Party
- ★ Recognition on video screens
- ★ Name listing in all printed materials and on event website
- ★ Recognition opportunity in Legacy Tower
- ★ Commemorative gift

*Estimated fair market value: \$2,100*

### **\$25,000 | *How Sweet It Is***

- ★ One reserved table on floor level for 10 guests
- ★ Two invitations to the Motown Underwriter Reception on September 12
- ★ 6 invitations to exclusive VIP reception
- ★ 5 VIP valet parking passes
- ★ Invitation to the Motown Children's Party
- ★ Recognition on video screens
- ★ Name listing in all printed materials and on event website
- ★ Recognition opportunity in Legacy Tower
- ★ Commemorative gift

*Estimated fair market value: \$2,000*

### **\$15,000 | *Dancing In The Streets***

- ★ One reserved table on floor level for 10 guests
- ★ Two invitations to the Motown Underwriter Reception on September 12
- ★ 4 invitations to an exclusive VIP reception
- ★ Invitation to the Motown Children's Party
- ★ Recognition on video screens
- ★ Name listing in all printed materials and on event website
- ★ Commemorative gift

*Estimated fair market value: \$1,950*

### **\$10,000 | *Let's Rock***

- ★ One reserved table on floor level for 10 guests
- ★ Two invitations to the Motown Underwriter Reception on September 12
- ★ Invitation to the Motown Children's Party
- ★ Recognition on video screens
- ★ Name listing in all printed materials and on event website
- ★ Commemorative gift

*Estimated fair market value: \$1,850*

### **\$5,000 | *I'll Be There***

- ★ One reserved table on floor level for 10 guests
- ★ Recognition on video screens
- ★ Name listing in all printed materials
- ★ Commemorative gift

*Estimated fair market value: \$1,750*

### **\$750 | *Solo***

- ★ One reserved seat on floor level
- ★ Commemorative gift

*Estimated fair market value: \$175*



Texas Children's  
Hospital®



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RESPONSE FORM

SATURDAY, SEPTEMBER 29, 2018 | REVENTION MUSIC CENTER



- Yes**, I would like to attend The Legacy of Motown Gala at the following level:
- \$100,000** *I Will Survive*
- \$75,000** *You Gotta Believe*
- \$50,000** *Celebrate*
- \$25,000** *How Sweet It Is*
- \$15,000** *Dancing In The Streets*
- \$10,000** *Let's Rock*
- \$5,000** *I'll Be There*
- \$750** *Solo*

NAME OR COMPANY NAME AS IT SHOULD APPEAR IN PRINTED MATERIALS\*

CONTACT NAME

ADDRESS

CITY

STATE

ZIP

DAYTIME PHONE

FAX

EMAIL

Texas Children's Hospital will detach and shred this portion immediately after payment is processed.

PAYMENT OPTIONS

- My enclosed check is payable to Texas Children's Hospital.
- My company's matching gift form is enclosed.
- Donation Only: \$ \_\_\_\_\_

I do not wish to accept any of the benefits offered at my giving level.

PLEASE CHARGE MY:  Mastercard  AMEX  Visa  Discover

NAME ON CARD

ADDRESS (IF DIFFERENT FROM ABOVE)

CARD NUMBER

EXP. DATE

AUTHORIZED SIGNATURE

DATE

\*Donor grants TCH the right, without charge, to use the name, likeness, and/or image of the Donor in photographic, paper, audiovisual, digital or any other form of medium (the "Media Materials") and to use, reproduce, distribute, and publish the Media Materials in any manner, including brochures, website postings, marketing materials, and publications describing TCH's development and business activities.

To have your name removed from our lists, call 832-824-6917 or email [optout@texaschildrens.org](mailto:optout@texaschildrens.org).

PLEASE RESPOND BY AUGUST 10 TO BE INCLUDED IN PRINT MATERIALS

MAIL Texas Children's Hospital  
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Houston, Texas 77030

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