Chinatown Community Development Center's

EVENT DATE 09.06.24

47th Anniversary Gala

THE WESTIN ST. FRANCIS
335 POWELL STREET, SF

(NEW LOCATION)

Event: Cocktail Attire

Sponsorship Commitment Form

☐ Title:	\$100,000
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- 20 Passes to Pre-Gala VIP Reception
- 20 Tickets to Gala Dinner
- Speaking opportunity at Gala Dinner
- Full-Page Color Ad (back cover) in the Program Book
- Logo in the Program Book, E-blast, at the Event, Social Media and Website
- 8 VIP Tickets to 2025 Chinese New Year Parade

☐ Community Advocate: \$25,000

- 10 Passes to Pre-Gala VIP Reception
- 10 Tickets to Gala Dinner
- Logo in the Program Book, E-blast, at the Event, Social Media and Website
- 4 VIP Tickets to 2025 Chinese New Year Parade

☐ Community Patron: \$5,000

- 2 Passes to Pre-Gala VIP Reception
- 10 Tickets to Gala Dinner
- Logo in the Program Book, E-blast, at the Event, Social Media and Website

☐ ____ Individual Dinner Ticket(s):

\$350/ticket (Early Bird)

or

\$500/ticket (After Monday, May 27th)

☐ Community Builder: \$50,000

- 12 Passes to Pre-Gala VIP Reception
- 12 Tickets to Gala Dinner
- Logo in the Program Book, E-blast, at the Event, Social Media and Website
- 4 VIP Tickets to 2025 Chinese New Year Parade

☐ Community Partner: \$10,000

- 10 Passes to Pre-Gala VIP Reception
- 10 Tickets to Gala Dinner
- Logo in the Program Book, E-blast, at the Event, Social Media and Website
- 2 VIP Tickets to 2025 Chinese New Year Parade

☐ Friends of CCDC (Individuals,

Nonprofits): \$3,500

- 2 Passes to Pre-Gala VIP Reception
- 5 Tickets to Gala Dinner
- Name in the Program Book, E-blast, at the Event, Social Media and Website

\square I'm unable to attend this event.

• Enclosed is my donation of \$ _____.

Logo Specifications

- High resolution RGB and CMYK with a minimum of 300 dpi
- JPEG, PNG, EPS or PDF
- Submit logo before Monday, July 29 to be included in the program book

Company Name:		_ Contact Person & Title:			
Address:		City/State/Zip:			
Cell Phone:	Email Address:				
Please list or acknowledge as:					
Please charge my:	☐ American Express	□ VISA	☐ MasterCard		
Card #:	Exp. Date:				
Card Holder Name:		CVV#:	Billing Zip Code:		
☐ Payment enclosed	☐ Pay online @ www.chi	natowncdc.org	☐ Please send me an invoice		

Please make checks payable to "Chinatown CDC" and mark " $47^{\rm th}$ Gala" in the memo.

Mail completed form and check to Chinatown CDC (Attn: Resource Dev. Department), 615 Grant Ave., San Francisco, CA 94108 by Monday, July 29, 2024.

For more information: email donate@chinatowncdc.org.

