**George C. Marshall HS Orchestra Sponsorship Program**

**Quarter Note $25 Half Note $50 Whole Note $75**

Donors at these levels will be listed in our programs for the whole school year and your business name will appear on our website.

**Sonata Level $100**

Your business will receive mention in our programs and can insert a 1/4 page of camera-ready art in our programs for the whole school year (4" X 2.5"). Your business name will appear on our website, with a link to your business website (if provided).

**Suite Level $250**

Your business will receive mention in our programs and can insert a 1/2 page of camera-ready art in our programs for the whole school year (5.25" X 4"). Your business name will appear on our website, with a link to your business website (if provided).

**Symphony Level $500**

Your business will receive mention in our programs and can insert a full page of camera-ready art in our programs for the whole school year (5.25" X 8.25"). You may request a chamber orchestra concert performance for your business. (Date, time, & location subject to Orchestra Director's approval.) Your business name will appear on our website, with a link to your business website (if provided).

*Marshall Orchestra Parents Association is a 501(c)(3) organization; our tax ID is 30-0583035. Retain the upper portion as your receipt. Please make checks payable to MOPA. Thank you for your tax deductible donation!*

*Please attach camera-ready art (JPG) for program – for Sonata, Suite and Symphony sponsor levels, or email a digital copy to* **cs\_ribeiro@verizon.net***..*

**Yes, I would like to be a Marshall Orchestra Sponsor**

|  |  |  |
| --- | --- | --- |
| Quarter Note $25 | Half Note $50 | Whole Note $75 |
| Sonata $100 | Suite $250 | Symphony $500 |

Would you prefer your gift to be anonymous? Yes \_\_\_\_\_\_ No \_\_\_\_\_\_\_\_

Your name (company): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Your address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ E-mail:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Student who referred this Sponsorship: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_