



S P O N S O R F O R M

BUSINESS NAME: _____

CONTACT NAME: _____

PHONE: _____

EMAIL: _____

ADDRESS: _____

- \$10,000 Presenting Sponsor
- \$7,500 Charity Partner & Presenting Partner
- \$5,000 5-Star Sponsor
- \$2,500 Gourmet Sponsor
- \$1,000 Epicurean Sponsor
- \$500 Prix Fixe Sponsor
- \$250 A La Carte Sponsor

MAIL CHECK TO:

YC Disabilities Foundation
 PO Box 549
 York, SC 29745
 — or pay through PayPal
www.maxabilities.org/foundation

FOR MORE INFO:

www.maxabilities.org/foundation

PROCEEDS BENEFIT:



DisAbilities
Foundation
 YORK COUNTY



Sponsorship Benefits	250	500	1,000	2,500	5,000	7,500
	Friend	Prix Fixe Sponsor	Epicurean Sponsor	Gourmet Sponsor	5-star sponsor	Presenting Sponsor
Become Presenting sponsor at Benefit with Logos on Auction website, flyer and banner						X
Name priority on materials						X
Logo on restaurant discount card					X	X
Mentioned on radio					X	X
Opportunity to welcome guests at the door of restaurants					X	X
Predominant advertising location among silent auction items					X	X
Footer on Website					X	X
Print logo in end of year recap pdf				X	X	X
Name on ads for event at the participating restaurants				X	X	X
Restaurant judging opportunity (have to taste each of the signature dishes)				X	X	X
Recognized on signage at each of the events			X	X	X	X
Email out to all past attendees about your donation and how it will help the disabilities board			X	X	X	X
Social Media shout-outs		X	X	X	X	X
Name on website DONORS TAB	X	X	X	X	X	X