

CATHOLIC CHARITIES SPECIAL EVENTS

SPONSOR FORM

**CONTACT:
TITLE:**

Street Address:

City & State:

Zip:

Telephone:

Email:

**ORGANIZATION/
COMPANY:**

<input checked="" type="checkbox"/>	Event Name	Sponsor Level	Amount
<input type="radio"/>	Top Tier Sponsor	_____	_____
<input type="radio"/>	Bishop's Gala	_____	_____
<input type="radio"/>	Clay Shoot	_____	_____
<input type="radio"/>	Jessie Games	_____	_____
<input type="radio"/>	Golf Classic	_____	_____
<input type="radio"/>	St. Nick Soiree	_____	_____

THANK
YOU

AMOUNT _____

CATHOLIC CHARITIES SPECIAL EVENTS

MARKETING

MARKETING CONTACT:

Street Address:

City & State:











Zip:

Telephone:

Email:

ORGANIZATION

LISTING:

Event Name	AD Specs	Logo Specs
Top Tier Sponsor	Full Page (5.75" wide x 9.25" high) Half Page (5.75" wide x 4.5" high) Quarter Page (2.75" wide x 4.5" high)	
Bishop's Gala	Full Page (5.75" wide x 9.25" high) Half Page (5.75" wide x 4.5" high) Quarter Page (2.75" wide x 4.5" high)	
Clay Shoot		
Jessie Games		
Golf Classic		
St. Nick Soiree		

Your organization tax information will be mailed shortly after pledge and or payment.

SUBMIT TO:
SPECIAL EVENTS
CCEVENTS@CCPGH.ORG
412-456-6950