

ARI Fall Ball 2024

A Night of Heroes

Dinner, Dancing and Auction

Friday, November 8, 2024 | Italian Center of Stamford



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| <p>Gold Cape Sponsor \$20,000</p> <ul style="list-style-type: none"> Two tables of 10 guests Sponsor two tables of ARI consumers* Premium seating Full-page ad back cover of program Recognition on event signage Print/social media promotions | <p>Bronze Cape Sponsor \$5,000</p> <ul style="list-style-type: none"> Six guest tickets Full-page ad in program Recognition on event signage Print/social media promotions | <p>Emerald Cape Sponsor \$1,000</p> <ul style="list-style-type: none"> Two guest tickets Quarter-page ad in program Recognition on event signage Social media promotions |
| <p>Silver Cape Sponsor \$10,000</p> <ul style="list-style-type: none"> One table of 10 guests Sponsor one table of ARI consumers* Full-page ad inside front cover of program Recognition on event signage Print/social media promotions | <p>Diamond Cape Sponsor \$2,500</p> <ul style="list-style-type: none"> Four guest tickets Half-page ad in program Recognition on event signage Social media promotions | <p>ARI Hero Sponsor \$185*</p> <ul style="list-style-type: none"> One ARI consumer ticket Shout-out listing in program |
| | <p>ARI Hero Table Sponsor \$1,600*</p> <ul style="list-style-type: none"> Name recognition on table for 10 ARI consumers Shout-out listing in program | <p>Individual Ticket \$185</p> <p>Table for 10 \$1,600</p> <p>Program Ads</p> <ul style="list-style-type: none"> Full-page ad (5x8) \$500 Half-page ad (5x3.75) \$250 Vertical quarter-page ad (2.25x3.75) \$150 Shout-out listing \$75 <p><small>Please send full color PDF/JPEG ad to gasparinog@arict.org</small></p> |

Name _____

Name(s) of guests _____

Company _____

Address _____

City _____ State _____ Zip _____

Cell phone _____ Email _____

Sponsorship level(s): _____

_____ Tickets # _____ Sponsor Consumer Tickets _____ Program Ad (size)

Enclosed is a check for \$ _____ payable to **ARI of CT**

Please contact me for my credit card information

I/We cannot attend, but would like to contribute \$ _____

** Your generosity allows ARI consumers to enjoy this wonderful evening. Your name will be on their table and in our program.*

RSVP by October 25th

Mail to: ARI of CT, 174 Richmond Hill Avenue, Stamford, Connecticut 06902
 You can also purchase tickets securely online at arict.org
 For more information call (203) 324-9258, ext.3023 or gasparinog@arict.org

Contributions are tax deductible to the extent allowed by law.