



PRESENTED BY **parx** CASINO

**Count us in for:**

- Cocktail Garden Sponsor\* (\$10,000) to include:
  - one table of ten seats in the dinner tent (premier location)
  - signature cocktail named for sponsor
  - 30 tickets to each of the Franklin Square attractions for the 2016 operating season
  - 15 tickets to the 2016 Chinese Lantern Festival
- Carousel Table Sponsor\* (\$5,000) to include:
  - one table of ten seats in the dinner tent (premier location)
  - 20 tickets to each of the Franklin Square attractions for the 2016 operating season
  - 6 tickets to the 2016 Chinese Lantern Festival
- Fountain Table Sponsor\* (\$3,000) to include:
  - one table of ten seats in the dinner tent
  - 10 tickets to each of the Franklin Square attractions for the 2015 operating season
  - 4 tickets to the 2016 Chinese Lantern Festival
- Playground Patron Tickets (\$500/couple): \_\_\_\_\_ couple x \$500 = Total: \$ \_\_\_\_\_
  - two individual tickets plus listing in program
- Individual Tickets (\$200/each): \_\_\_\_\_ tickets x \$200 = Total: \$ \_\_\_\_\_
- Franklin Square "First Timers" (\$150/each):\*\* \_\_\_\_\_ tickets x \$150 = Total: \$ \_\_\_\_\_
- I cannot attend, but I would like to make a donation in honor of Franklin Square's 10<sup>th</sup> birthday in the amount of: \_\_\_\_\_ \$ \_\_\_\_\_
- I would like to "name" a brick (\$100/each):\*\*\* \_\_\_\_\_ tickets x \$100 = Total: \$ \_\_\_\_\_

\* See sponsorship proposal for additional benefits.

\*\* Limited availability and for a limited time.

\*\*\*A member of the Historic Philadelphia, Inc. staff will contact you regarding your personalized brick message.

Contact Name: \_\_\_\_\_

Company: \_\_\_\_\_

*Please show name as it should be appear on printed materials. Deadline is March 11 for inclusion in the invitation.*

Address: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

Email: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

*Please sign here to confirm your commitment.*

**Please check payment type:**

MasterCard  Visa  AmEx  Check enclosed (payable to Historic Philadelphia, Inc.)

Name as it appears on your credit card: \_\_\_\_\_

Credit card number: \_\_\_\_\_ Exp: \_\_\_\_\_

**Please mail or fax form to Jannah Abdul-Aziz at Historic Philadelphia, Inc. at 150 S. Independence Mall West, Suite 550, Philadelphia, PA 19106. Fax: (215)629-5814. Questions: Please contact Jannah (215-629-5801 ext.203, jaziz@historicphiladelphia.org) or Michele VonDeak (267-978-8263, Michele@tvdassociates.com).**

The official registration and financial information of Historic Philadelphia, Inc. may be obtained from the Pennsylvania Department of State by calling toll free, within Pennsylvania, 1 (800) 732-0999. Registration does not imply endorsement.

