



PRESENTED BY **parx** CASINO

Count us in for:

- Cocktail Garden Sponsor* (\$10,000) to include:
 - two tables of ten seats in the dinner tent (premier location)
 - signature cocktail named for sponsor
 - 60 tickets to each of the Franklin Square attractions for the 2018 operating season
 - 20 tickets for the Philadelphia Chinese Lantern Festival in Franklin Square
- Carousel Table Sponsor* (\$5,000) to include:
 - one table of ten seats in the dinner tent (premier location)
 - opportunity to “name” a carousel figure for the Square Derby event
 - 30 tickets to each of the Franklin Square attractions for the 2018 operating season
 - 10 tickets for the Philadelphia Chinese Lantern Festival in Franklin Square
- Fountain Table Sponsor* (\$3,000) to include:
 - one table of ten seats in the dinner tent
 - 15 tickets to each of the Franklin Square attractions for the 2018 operating season
 - 5 tickets for the Philadelphia Chinese Lantern Festival in Franklin Square
- Playground Patron Tickets (\$500/couple): _____ couple x \$500 = Total: \$ _____
 - two individual tickets plus listing in program
 - 6 tickets to each of the Franklin Square attractions for the 2018 operating season
 - 2 tickets for the Philadelphia Chinese Lantern Festival in Franklin Square
- Individual Tickets (\$200/each): _____ tickets x \$200 = Total: \$ _____
- I cannot attend, but I would like to make a donation in honor of Franklin Square in the amount of: _____ \$ _____
- I would like to “name” a brick (\$100/each):*** _____ bricks 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 April 23rd for inclusion in the event program.
 Address: _____
 City/State/Zip: _____
 Phone: _____ 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: _____ CCV: _____

***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.213, jaziz@historicphiladelphia.org)***