

SPONSORSHIP LEVELS

	SUMMA CUM LAUDE \$20,000	MAGNA CUM LAUDE \$10,000	CUM LAUDE \$5,000	HIGH HONORS \$2,500	DEAN'S LIST \$1,500
Industry exclusivity	◆				
Recognition in pre-event collateral*	logo				
Premium table placement	◆				
Opportunity to share a message with attendees	◆	◆			
Recognition in select email and social media communications	logo/ tag	name			
Recognition by event emcee	◆	◆	◆		
Recognition in post-event collateral	◆	◆	◆		
Recognition on event website	logo	graduated logo	graduated logo	name	
Recognition in event print program	logo	graduated logo	graduated logo	name	graduated name
Reserved table for 7 guests**	◆	◆	◆	◆	◆
Recognition on event screens	◆	◆	◆	◆	◆
Table signage	◆	◆	◆	◆	◆

*As print timeline allows.

**A CSF Alum or staff member will be seated at each table. Please let us know if you would like to fill the 8th seat yourself.

For information, please contact 425-213-5854 or
empoweringyouth@collegesuccessfoundation.org



FISHER PAVILION
at Seattle Center
OCT 19, 2023



SPONSOR RESPONSE FORM

Luncheon | October 19, 2023 | Fisher Pavilion at Seattle Center

- ☐ I/my company will be a sponsor*:
- ☐ \$20,000 Summa Cum Laude Sponsor
 - ☐ \$10,000 Magna Cum Laude Sponsor
 - ☐ \$5,000 Cum Laude Sponsor
 - ☐ \$2,500 High Honors Sponsor
 - ☐ \$1,500 Dean's List Sponsor
- ☐ For full sponsor benefit descriptions, please refer to Sponsor Levels listed on opposite page. For general luncheon information, please visit [our website](#).

Please make a selection (choose one option only):

- ☐ My company will fill seven seats and will be sat with a CSF Alum or staff member **or**
- ☐ My company will occupy _____ seats at the table and will donate the remaining seats back to CSF.

Name: _____ Company: _____

Address: _____ City/State/Zip: _____

Telephone: _____ Email: _____

All sponsor references should be listed as: _____
(name, company or organization)

Payment due October 1, 2023:

- ☐ My check, payable to "College Success Foundation" is enclosed.
- ☐ Please invoice me/my company.
- ☐ Please charge my credit card: ☐ MasterCard ☐ Visa ☐ American Express

Card Number: _____ Exp. Date: _____

Signature: _____

- ☐ I will pay directly [online](#).

College Success Foundation is a 501(c)(3) organization. Tax ID #91-2036088
Contact: empoweringyouth@collegesuccessfoundation.org | 425-213-5854

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