



## Sponsorship Opportunities for the Child Educational Center's 19th Annual Wine Tasting Benefit and Auction June 14, 2008

I/We would like to sponsor the CEC's  
Annual Wine Tasting Benefit & Auction at the following level :

<p>_____ <b>Petite Syrah: \$ 100</b> Listing in the event program</p> <p>_____ <b>Sauvignon Blanc: \$ 250</b> Business card ad in the event program</p> <p>_____ <b>Zinfandel: \$ 500</b> 1/4 page ad in the event program</p> <p>_____ <b>Merlot: \$1,000</b> 2 VIP tickets Half page ad in the event program</p>	<p>_____ <b>Cabernet Sauvignon: \$1,500</b> 4 VIP tickets Half page ad in the event program</p> <p>_____ <b>Chardonnay: \$2,500</b> 6 VIP tickets Full page ad in the event program</p> <p>_____ <b>Pinot Noir: \$5,000</b> 8 VIP tickets Full page ad (inside front/back cover) in the event program</p>
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All sponsors will be listed in the event program by classification and giving level as well as on sponsor boards located throughout the Caltech Avery House, the exceptional venue for this event. Sponsors at the \$250 level and above will also be included in the event's invitation if their registration is received by April 25, 2008. All monetary gifts are tax deductible to the extent allowable by law. Thanks to the generosity of people like you, the CEC continues to fulfill the promise of childhood for families throughout our community and beyond.

**Please return this form to:  
Child Educational Center, 140 Foothill Blvd. La Canada, CA 91011  
or fax to (818) 393-4243 by May 9, 2008.**

**Upon receipt you will be contacted regarding your ad/message for the event program.  
If you have any questions, please call (818) 354-3418.**

\_\_\_ I/We would like to be a **sponsor** for the opportunity/ies listed above in the amount of \$\_\_\_\_\_.

\_\_\_ I/We would like to support the Child Educational Center's 19th Annual Wine Tasting Benefit in the amount of \$\_\_\_\_\_.

**Donor or Company Name** (for listing in program): \_\_\_\_\_

**Contact person** \_\_\_\_\_ **Contact phone** \_\_\_\_\_

**Contact address** \_\_\_\_\_ **City** \_\_\_\_\_ **Zip** \_\_\_\_\_

*Please make your check payable to **Child Educational Center**. If using VISA or MasterCard, please complete the following:*

Type of card: \_\_\_\_\_ Name on card: \_\_\_\_\_

Expiration date: \_\_\_\_\_ Authorized signature: \_\_\_\_\_

Card Number: \_\_\_\_\_

**The Child Educational Center is a 501(c)(3) non-profit organization, tax ID 95-3403258**