



## SPONSORSHIP OPPORTUNITIES *for* LE MASQUERADE 2018

**\$10,000 Platinum**

- Table of 10
- Special gifts for each couple
- Personal wait staff
- Fully Hosted premium bar
- One hour Onstage Acting Workshop for up to 20 children (led by HTY Artistic Director & actors)
- One full page of advertising in Le Masque 2018 Program Book (ad provided must be camera ready – 5”w x 7.75”h)
- One full page of advertising in playbills for five HTY 2018-19 Productions (ad provided must be camera ready – 5”w x 7.75”h)
- Ten tickets to opening night performance of two HTY 2018-19 Productions
- Your logo included on HTY Sponsor Segment on KGMB & KHNL airing in September 2018

**\$7,500 Gold**

- Table of 10
- Special gifts for each couple
- Personal wait staff
- Fully Hosted premium bar
- One hour Onstage Acting Workshop for up to 10 children (led by HTY Artistic Director & actors)
- One 1/2 page of advertising in Le Masque 2018 Program Book (ad provided must be camera ready – 5”w x 3.75h)
- One 1/2 page of advertising in playbill for HTY 2018-19 Production of your choice (ad provided must be camera ready – 5”w x 3.75h)
- Ten tickets to opening night performance of one HTY 2018-19 Production
- Your logo included on HTY Sponsor Segment on KGMB & KHNL airing in September 2018

**\$5,000 Silver**

- Table of 10
- Four Bottles of complimentary wine
- One hour Onstage Acting Workshop for up to 5 children (led by HTY Artistic Director & actors)
- One 1/2 page of advertising in Le Masque 2018 Program Book (ad provided must be camera ready – 5”w x 3.75h)

**\$3,500 Friends & Family**

- Table of 10
- Two Bottles of complimentary wine

**\$500 Individual Seat**

- Donation** I am unable to attend but please accept my donation in the amount of \$\_\_\_\_\_.

**Fill out form below, or purchase online at [htyweb.org](http://htyweb.org)**

Sponsor Name (as you would like to be acknowledged) \_\_\_\_\_ Contact Person \_\_\_\_\_

Address \_\_\_\_\_

Email \_\_\_\_\_ Phone \_\_\_\_\_

Method of Payment:  CHECK  VISA or  MasterCard \_\_\_\_\_  
 Credit Card Number \_\_\_\_\_ Exp Date \_\_\_\_\_ CVV No. \_\_\_\_\_

Total Enclosed or Credit Card Charge \_\_\_\_\_

**Please fax this form to 839-7018 or send with check made payable to: Honolulu Theatre for Youth, 1149 Bethel St., Ste 700, Honolulu, HI 96813  
 For more information on this event, please call 839-9885 or visit [www.htyweb.org](http://www.htyweb.org).**

