12th Annual Gala



Saturday, November 2, 2024

SPONSORSHIP COMMITMENT FORM

Please complete this form and return to HWNTFW by 10/01/2024

CEMPAZUCHITL/MARIGOLD SPONSOR - \$20,000

- 3 TABLES (30 GALA SEATS)
- COMPANY LOGO ON HWNTFW WEBSITE
- RECOGNITION ON ALL SOCIAL MEDIA
- COMPANY LOGO ON PAPEL PICADO
- COMPANY LOGO ON EVENT SIGNAGE AND GALA PROGRAM
- 2 FULL PAGE ADS IN THE PROGRAM
- OPPORTUNITY TO SPEAK FROM THE PODIUM
- LIP SCHOLARSHIP IN COMPANY NAME
- VIP RECEPTION FOR YOU AND YOUR GUESTS AND DRINK

LA CATRINA SPONSOR - \$10,000

- 2 TABLES (20 GALA SEATS)
- COMPANY LOGO ON HWNTFW WEBSITE
- RECOGNITION ON ALL SOCIAL MEDIA
- COMPANY LOGO ON PAPEL PICADO
- COMPANY LOGO ON EVENT SIGNAGE AND GALA PROGRAM
- 1 FULL PAGE AD IN THE PROGRAM
- LIP SCHOLARSHIP IN COMPANY NAME

EL PADRINO SPONSOR - \$5.000

- COMPANY LOGO ON HWNTFW WEBSITE
- RECOGNITION ON ALL SOCIAL MEDIA
- COMPANY LOGO ON PAPEL PICADO
- COMPANY LOGO ON EVENT SIGNAGE AND GALA PROGRAM
- HALF PAGE AD IN THE PROGRAM
- LIP SCHOLARSHIP IN COMPANY NAME

COMPADRE/COMADRE SPONSOR - \$2,500

- 1 TABLE (10 GALA SEATS)
- COMPANY LOGO ON HWNTFW WEBSITE
- RECOGNITION ON ALL SOCIAL MEDIA
- COMPANY NAME ON PAPEL PICADO COMPANY LISTING ON EVENT SIGNAGE

LA FAMILIA SPONSOR - \$1,500

- 1 TABLE (10 GALA SEATS)
- COMPANY LISTING ON HWNTFW WEBSITE
- RECOGNITION ON ALL SOCIAL MEDIA
- COMPANY LISTING ON EVENT SIGNAGE COMPANY LISTING IN THE GALA PROGRAM
- COMPANY LISTING IN THE GALA PROGRAM

COMPANY NAME: CONTACT NAME: ADDRESS: CITY / STATE / ZIP: PHONE NUMBER: EMAIL: SPONSORSHIP TOTAL: \$ I AM UNABLE TO PARTICIPATE, BUT PLEASE ACCEPT THIS DONATION.

NAME ON CARD: VISA ____ MASTERCARD ____ AMEX ____ DISCOVER

_____ CCV ____ EXP DATE __ CREDIT CARD # _

SPONSORSHIP/DONATION \$____

Email your commitment form to: hwntfwgala@gmail.com or mail the form with check to: Hispanic Women's Network of Texas - Fort Worth P.O BOX 1523

Fort Worth, Texas 76101