

RESERVATION FORM

THE 17TH ANNUAL GIANTS OF BROADCASTING AND ELECTRONIC ARTS

THURSDAY, NOVEMBER 14, 2019 | GOTHAM HALL, NYC
11:30 AM RECEPTION
12 Noon LUNCHEON AND AWARDS CEREMONY



NAME _____ TITLE _____

COMPANY _____

ADDRESS (PLEASE INCLUDE FLOOR NUMBER OR SUITE NUMBER IF APPLICABLE) _____

CITY _____ STATE _____ ZIP CODE _____

TELEPHONE _____ EMAIL _____ CONTACT NAME _____

Sponsorships/Tables

DIAMOND SPONSOR **\$30,000**

Two Tables of Ten Each (20 Seats) in First Two Rows, Back Cover, Inside Front Cover, or Spread in Program Journal (first come, first choice), Diamond Sponsor Listing, Corporate Sponsor Logo on all Printed Materials, Logo on Banner Ads, Logo on Rotating Slide and Posters at Event, Public Acknowledgment at Event

PLATINUM SPONSOR **\$25,000**

Best Available Seating for a Table of Ten, Full-Page Program Journal Ad (premium position), Platinum Sponsor Listing, Logo on Banner Ads (sized within sponsorship tier), Logo on Rotating Slide and Posters at Event, Public Acknowledgment at Event

STAR SPONSOR **\$20,000**

Premium Seating for a Table of Ten, Full-Page Program Journal Ad (premium position within tier), Star Sponsor Listing, Logo on Rotating Slide at Event, Public Acknowledgment at Event

GOLD TABLE **\$15,000**

Includes Priority Seating for a Table of Ten, Full-Page Program Journal Ad and Gold Listing

Tables (continued) & Individual Tickets

SILVER TABLE **\$10,000**

Includes Seating for a Table of Ten, Full-Page Program Journal Ad and Silver Listing

BRONZE TABLE **\$7,750**

Includes Seating for a Table of Ten and Bronze Listing in Program Journal

PATRON TICKETS **\$1,275 ea.**

Please indicate number of Patron tickets you wish to reserve: _____

BENEFACTOR TICKETS **\$775 ea.**

Please indicate number of Benefactor tickets you wish to reserve: _____

Program Journal Advertising*

FULL-PAGE AD **\$3,500**

HALF-PAGE AD **\$2,000**

*Please contact Joyce@GiantsofBroadcasting.com for ad submission details.

Payment Your contribution, less \$160 per ticket, is tax deductible.

My check in the amount of \$ _____ made payable to **THE LIBRARY OF AMERICAN BROADCASTING FOUNDATION** is enclosed.

Please charge my Visa MasterCard American Express card for the amount of \$ _____

NAME ON CREDIT CARD _____ CREDIT CARD NUMBER _____ EXP. DATE _____

BILLING ADDRESS (IF DIFFERENT FROM ABOVE) _____

Please return this form with your payment to:

Joyce Tudryn, Library of American Broadcasting Foundation, c/o IRTS, 1697 Broadway, Suite 404, New York, NY 10019

For more information, contact Joyce Tudryn at (212) 867-6650, Ext. 11 or email Joyce@GiantsofBroadcasting.com