



2022 HALL OF MENTORSHIP DINNER

Thursday, October 6

The New York Hilton Midtown
6:30 PM Reception ~ 7:30 PM Dinner

PLEASE RESERVE

- GALAXY DONOR at \$100,000** includes prime seating for up to 40, special Journal cover wrap, color congratulatory Page in Journal *, plus signage and acknowledgement at dinner and in publicity.
- GOLD DONOR at \$75,000** includes prime seating for up to 30, congratulatory Back Cover of Journal*, plus signage and acknowledgement at dinner and in publicity.
- SILVER DONOR at \$50,000** includes prime seating for 20, first come first served congratulatory Journal Center Spread, Inside Front Cover, or Inside Back Cover*, plus signage and acknowledgement at dinner and in publicity.
- BRONZE DONOR at \$35,000** includes prime seating for 10 or partner seating for 20, color congratulatory Page in Journal* (best placement available within tier), and corporate logo on a solo slide at the dinner.
- PREMIER TABLE at \$27,500** includes premier seating for 10, a color congratulatory Page in Journal*, and corporate logo included on Premier Sponsors group slide at the dinner.
- PARTNER TABLE at \$20,000** includes seating for 10 and a color congratulatory Page in Journal*.
- TABLE OF TEN at \$15,000**
- INDIVIDUAL TICKETS at \$1,500** each
of Tickets _____
- COLOR JOURNAL PAGE at \$7,500***
- COLOR JOURNAL HALF PAGE (horizontal) at \$5,000***
- COLOR JOURNAL QUARTER PAGE (vertical) at \$3,500***
- I/We cannot attend but wish to contribute \$ _____**

**Journal specs and deadline date will be sent to you after we receive your order.*

The IRTS Foundation is a 501(c)(3) charity, Federal Tax ID No. 13-6149966.
Your contribution, less \$300 per ticket, may be tax-deductible. Please consult with your tax advisor.

PAYMENT INFORMATION

- Please charge my Visa, MasterCard, or American Express card.

Name (as it appears on card): _____

Account #: _____ Expiration: _____ Security Code: _____

Billing Address (if different than below): _____

Signature: _____

- Please send me an invoice.

First Name: _____ MI: _____ Last Name: _____

Title: _____ Phone: _____ E-mail: _____

Company: _____

(Please print exactly as you wish your company to be listed in the Dinner Journal.)

Address: _____ Floor/Suite #: _____

City: _____ State: _____ Zip: _____

PLEASE E-MAIL FORM TO: joyce.tudryn@irts.org