



# 2023 HALL OF MENTORSHIP DINNER

Thursday, September 28

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 guests, on-screen congratulatory ad in heavy rotation, most prominent ad position in Digital Journal\*, plus signage, logo slide, and acknowledgment at the dinner.
- GOLD DONOR at \$75,000** includes prime seating for up to 30 guests, on-screen congratulatory ad in high rotation, prominent ad position in Digital Journal\*, plus signage, logo slide, and acknowledgment at the dinner.
- SILVER DONOR at \$50,000** includes prime seating for 20 guests, on-screen congratulatory ad in semi-high rotation, ad in Digital Journal\* positioned according to tier, plus signage, logo slide, and acknowledgment at the dinner.
- BRONZE DONOR at \$35,000** includes prime seating for 10 or Partner Table location seating for 20 guests, on-screen congratulatory ad, ad in Digital Journal\* positioned according to tier, plus logo slide.

**PREMIER TABLE at \$27,500** includes premier seating for 10 guests, on-screen congratulatory ad, plus logo slide and ad in Digital Journal\*.

**PARTNER TABLE at \$20,000** includes seating for 10 guests, and on-screen plus Digital Journal\* congratulatory ad.

**TABLE OF TEN at \$15,000**

**INDIVIDUAL TICKETS at \$1,500** each  
# of Tickets \_\_\_\_\_

### À LA CARTE DIGITAL CONGRATULATORY ADS

-Will only appear in Digital Journal.

-Already included in Partner Table and higher tier purchases.

**DIGITAL JOURNAL FULL PAGE AD (horizontal) at \$7,500\***

**DIGITAL JOURNAL HALF PAGE AD (vertical) at \$5,000\***

**DIGITAL JOURNAL QUARTER PAGE AD (horizontal) at \$3,500\***

**I/We cannot attend but wish to contribute \$ \_\_\_\_\_**

*\*Digital Journal specs provided when order is received. Both on-screen and full-page ads are HORIZONTAL.*

The International Radio and Television Society Foundation, Inc. is a 501(c)(3) charity, Federal Tax ID No. 13-6149966.  
*Your contribution, less \$316 per ticket, is charitable.*

## 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 ~ PHONE: 212-867-6650, PROMPT 9**