



SPONSORSHIP REPLY FORM



Thank you for your support. Please email this form to Heather Olson at Heather.Olson@FHCW.org by **Friday, March 22, 2019** or complete the form online at www.FHCW.org/ArtInTheCity/ReplyForm.

You may also submit your form via mail using the address below.

SPONSORSHIP LEVEL:

- Curator of the Arts - \$10,000
- Collector of the Arts - \$5,000
- Aficionado of the Arts - \$2,500
- Supporter of the Arts - \$1,000
- Friend of the Arts - \$500
- Other _____ (Amount)

COMPANY/ORGANIZATION

CONTACT PERSON

TITLE OF CONTACT PERSON

EMAIL

PHONE NUMBER

ADDRESS

CITY/STATE/ZIP

Corporate Logo: Please email a high-resolution logo in .JPG format to: Heather.Olson@FHCW.org.

Advertisement: Please format your ad for the Art in the City Program Booklet using the following guide:

Sponsorship Level	Ad Size	Ad Dimensions	Color
\$10,000 Curator	Full Page	8" height x 5" width	Full Color
\$5,000 Collector	Full Page	8" height x 5" width	Full Color
\$2,500 Aficionado	Half Page	4" height x 5" width	Black and White
\$1,000 Supporter	Quarter Page	4" height x 2.5" width	Black and White

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Sponsorship payments should be made payable to "Family Health Center of Worcester" and mailed to: Family Health Center of Worcester | ATTN: Art in the City | P.O. Box 20205 | Worcester, MA | 01602-0205.

Questions? Please contact Heather Olson at (508) 860-7902.