



## A NIGHT IN MONTE CARLO

6:30 PM - 11 PM

SATURDAY, OCTOBER 17, 2009

SHERATON HOTEL

OVERLAND PARK, KS

Dear Friend,

The Asthma and Allergy Foundation of America, Greater Kansas City Chapter cordially invites you to be a supporter of our eleventh annual fundraiser to benefit AAFA-KC's educational, public awareness and benevolent programs.

## A NIGHT IN MONTE CARLO

Includes Dinner, Gaming and Auction. Cocktail attire.

### SPONSORSHIPS

#### Presenting Sponsors \$15,000

Includes two dining tables with preferential seating, customized casino table sign, company logo printed on gaming cash, and sponsored racing mouse as well as recognition as event sponsor on all publicity and online promotion, and full-page advertisement in program.

#### Event Sponsors \$10,000

Includes one dining table with preferential seating, customized casino table sign, and sponsored racing mouse as well as recognition as event sponsor on all publicity and online promotion, and full-page advertisement in program.

#### Benefactors \$5,000

Includes one dining table with preferential seating, customized casino table sign, sponsored racing mouse and half-page advertisement in program.

#### Patrons \$2,500

Includes one dining table, customized casino table sign and quarter-page advertisement in program.

#### Supporters \$1,000

Includes your name listed in program and your choice of option 1) one dining table, or 2) half-page advertisement in program.

#### Individual Contributors \$500

Includes your name listed in program and your choice of option 1) four entrance passes to event, or 2) customized casino table sign.

#### Individuals \$125 each

Includes one entrance pass to event and name listed in program.

#### Sponsored Racing Mouse \$100 each

## CORPORATE SPONSOR AGREEMENT

Company Name: \_\_\_\_\_ Contact Name: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_ Email: \_\_\_\_\_

### YES! We would like to support AAFA-KC through A Night In Monte Carlo as a:

- |                                                        |                                                                             |                                                       |
|--------------------------------------------------------|-----------------------------------------------------------------------------|-------------------------------------------------------|
| <input type="checkbox"/> Presenting Sponsor (\$15,000) | <input type="checkbox"/> Patron (\$2,500)                                   | <input type="checkbox"/> Individual (\$125)           |
| <input type="checkbox"/> Event Sponsor (\$10,000)      | <input type="checkbox"/> Supporter (\$1,000) Option 1 or 2 _____            | <input type="checkbox"/> Racing Mouse Sponsor (\$100) |
| <input type="checkbox"/> Benefactor (\$5,000)          | <input type="checkbox"/> Individual Contributor (\$500) Option 1 or 2 _____ | Name of Mouse: _____                                  |

Method of Payment:  Check payable to AAFA-KC  Cash  Visa  MasterCard

Card Number: \_\_\_\_\_ Exp. Date: \_\_\_\_\_

Name as it appears on card: \_\_\_\_\_ Signature: \_\_\_\_\_

We will be unable to attend, but we are enclosing a gift of \$ \_\_\_\_\_

AAFA-KC Board Member Contact Name: \_\_\_\_\_

**Please FAX or MAIL this form prior to September 15, 2009 to ensure program recognition. All sponsorships received after September 15 will be included in an addendum.**



Asthma and Allergy  
Foundation of America®  
GREATER KANSAS CITY CHAPTER

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*A Commitment to Our Community*