

In Support of



BOO!

## To Breast Cancer Gala

Dear WCA Foundation Supporter,

October is Breast Cancer Awareness Month and in honor of this time we are pleased to invite you to be part of **BOO! To Breast Cancer Gala**. We are thrilled to begin Breast Cancer Awareness Month by hosting a Halloween Dinner Gala, Saturday, October 27<sup>th</sup> from 6 to 11 p.m.

We would like this to become an awaited tradition for many of our attendees, especially our survivors and patients of breast cancer. It is through your partnership and the contribution of your time, talent, treasure, and resources that will bring a day of Hope, Health, and Healing into the Chautauqua region, while supporting such an enriching cause.

We sincerely hope that there will come a day when support for Breast Cancer is not as essential as it is today and a cure is uncovered for this disease. However, today that is not the case and because that is so, your sponsorship and partnership has great urgency. The barometer of our current economy has caused many of us to be more conscious of what we support. We ask that as you reflect on your charitable gift, you remember that by supporting this mission, you're not only supporting our fight against breast cancer, but also families, children, men, women, the rich, the poor, and every ethnic group -- because breast cancer effects all of us; it does not discriminate.

The UPMC Chautauqua Cancer Care Program is one of the 25% of NY programs accredited by the Commission on Cancer of the American College of Surgeons. Our program includes prevention education, screening, diagnostics, data collection and registry, and a holistic approach to Cancer Care.

As new advances are made in surgery, chemotherapy, radiation therapy and other areas of cancer treatment, we are committed to bringing them to you. Our aim is to set realistic treatment goals according to the national standards, while meeting medical, psychological and nutritional needs. We provide patients and their families with the answers they need about diagnosis, treatment and recovery.

Every dollar received supports WCA Foundation and its mission to sustain the current and future healthcare services of UPMC Chautauqua. Donations large or small are welcomed for the purposes of building this endowment fund for women's cancer, The Rapaport Fund.

As you consider your sponsorship of **BOO! To Breast Cancer**, please know that you will be helping us inspire families, inform communities, and save lives. We are most grateful for your support. Thank you.

Sincerely,

A handwritten signature in black ink that reads "Megan Barone".

Megan Barone  
Director of Development UPMC Chautauqua WCA/WCA Foundation  
Baronema3@upmc.edu

### **MUMMY OF ALL SPONSORS \$2,500 PRESENTING SPONSOR**

- Naming Rights-presented by your company name and logo
- Company name/tagline mentioned in all press opportunities
- Company logo/tagline on all collateral pieces
  - Flyers, posters, and marketing materials (respond by August 20<sup>th</sup> to be included in all print materials)
- Prime space for company logo, tagline and link on event website, social media and in program
  - Attendees will be directed to the site post-event (photo viewing)
- Prime Banner Space at event
  - Banner to be provided by sponsor
- Reserved table at event for 10

### **GHOSTWRITER SPONSOR \$2,000 EXCLUSIVE OPPORTUNITY (ONE AVAILABLE)**

- Name/Logo on all tickets (respond by August 20<sup>th</sup> to be included)
- Name in program
- Reserved table for 10

### **WITCHES BREW SPONSOR \$1,500**

- Company name/tagline on all collateral pieces
  - Flyers, posters, and marketing materials, program (respond by August 20<sup>th</sup> to be included in all print materials)
- Prime space for company logo, tagline and link on event website and social media
  - Attendees will be directed to the site post-event (photo viewing)
- Prime Banner Space at event
  - Banner to be provided by sponsor
- Four tickets to event

### **COSTUME CONTEST SPONSOR \$1,000**

- Special Announcement/Call out during costume contest
- Sign prominently displayed on stage during contest
- Prime space for Company logo/tagline and link on event website, social media and program
  - Attendees will be directed to the site post-event (photo-viewing)
- Two tickets to event

### **PHOTO BOOTH SPONSOR \$1,000 (ONE AVAILABLE)**

- Company name on Photo Booth signage at the event
- Company name/logo on each participant photo
- Company Name in program
- Company name/link on event website and social media
  - Attendees will be directed to the site post-event(photo-viewing)
- Two tickets to event

### **JILL O' LANTERN TABLE SPONSOR \$500**

- Signage at table
- Company Name /Name in program
- Banner space at event
  - Banner provided by sponsor
- Reserved Table for Eight

### **GHOULS SPONSOR PROGRAM ADVERTISING OPPORTUNITIES**

- Inside Cover \$300
- Inside Back Cover \$300
- Full Page Ad \$150
- Half Page Ad \$100
- Business Card Ad \$50

### **TRICK OR TREAT DONATION (IN KIND/BASKET)**

- Company name in program

BOO!

## To Breast Cancer

If you are interested in supporting **BOO! To Breast Cancer** Endowment Fund (**The Rapaport Fund**) for the WCA Foundation, please fill out the following information and return to: WCA Foundation,

Attn: Megan Barone 207 Foote Avenue, Jamestown NY 14701.

Please make checks out to: WCA Foundation (All gifts are tax-deductible) Thank you for your support!

- Mummy of All Sponsors \$3,500
- Witches Brew Sponsor \$1,500
- Costume Contest Sponsor \$1,000
- Photo Booth Sponsor \$1,000
- Jill O'Lantern Table Sponsor \$500
- Ghouls Sponsor
  - Inside Cover
  - Inside Back Cover
  - Full Page Ad
  - Half Page Ad
  - Business Card Ad
- Trick or Treat Sponsor In Kind Donation
- \_\_\_\_\_ Tickets to event (\$40) per ticket includes appetizer, dinner and desert \$ \_\_\_\_\_

Organization \_\_\_\_\_ Contact  
Name \_\_\_\_\_

Address \_\_\_\_\_  
\_\_\_\_\_

Phone \_\_\_\_\_

Email \_\_\_\_\_

Payment method:

- Check
- Credit Card (Mastercard, Discover, American Express, Visa)
  - Credit Card Number \_\_\_\_\_ Exp \_\_\_\_\_ 3  
Digit Code \_\_\_\_\_
  - Name on Card \_\_\_\_\_ Address (If different from above)  
\_\_\_\_\_
- Total Amount to be charged \_\_\_\_\_

Purchase tickets online at [www.wcafoundationjamestown.org](http://www.wcafoundationjamestown.org)

