

# PASSPORT AROUND THE WORLD

FOR OFFICE USE ONLY



## Live Oak Annual Gala & Auction

NUMBER

### UNDERWRITING CONTRACT

DATE: / /

### UNDERWRITER INFORMATION:

Individual/Company Name \_\_\_\_\_

Contact (if company) \_\_\_\_\_ Title \_\_\_\_\_

Recognition in Program? No \_\_\_\_\_ Yes \_\_\_\_\_ How would you like to be listed:

\_\_\_\_\_

Address \_\_\_\_\_

City, State, Zip \_\_\_\_\_

Phone Number \_\_\_\_\_

Email \_\_\_\_\_

Signature \_\_\_\_\_

Relationship: Parent \_\_\_\_\_ Grandparent \_\_\_\_\_ Friend \_\_\_\_\_ Relative \_\_\_\_\_ Other \_\_\_\_\_

### UNDERWRITING LEVELS\*

\_\_\_\_\_ **BRONZE** - \$300. (1/3 page Gala Program ad)

\_\_\_\_\_ **SILVER** - \$500. (1/2 page Gala Program ad and slideshow recognition)

\_\_\_\_\_ **GOLD** - \$1,000. (Full page Gala Program ad and slideshow recognition)

\_\_\_\_\_ **PLATINUM** - \$1,500. (Two Full page Gala Program ads and slideshow recognition)

\_\_\_\_\_ PLEASE ACCEPT A DONATION OF \$ \_\_\_\_\_ (I do not want an ad or recognition.)

\*The amount of the contribution that is tax-deductible for federal income tax purposes is limited to the excess contribution over the value of the benefits provided.

### PAYMENT METHOD

Payment Method: \_\_\_\_\_ Mastercard \_\_\_\_\_ Visa \_\_\_\_\_ Discover \_\_\_\_\_ Check

Account Number: \_\_\_\_\_ Exp. Date \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_

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

\_\_\_\_\_  
Authorized Signature

\_\_\_\_\_  
Date

Thank you for your generous support!

[www.liveoakclassical.com](http://www.liveoakclassical.com)

Please return to Live Oak Classical School Office • P.O. Box 647 • Waco, Texas 76703