

“Take a Chance on a Dream” 2012 Masterpiece Gala Sponsorship Commitment and Ticket Order Form

Please complete this form, indicating your sponsorship level and/or # of individual tickets, and return it to Sophia Academy at the address shown below

Name of Company or Individual: _____

Company Contact: _____

Address: _____

Phone: _____

Email: _____

Web address: _____

Listing for program (if different than above): _____

____ \$7,500 Ace Sponsor

____ \$5,000 King Sponsor

____ \$2,500 Queen Sponsor

____ \$1,000 Golden Eagle Sponsor

____ \$500 Eagle Sponsor

\$75 Individual Tickets-Indicate Quantity ____

Please provide names of those attending the Gala:

Payment of \$_____ is enclosed.

Sponsors, please send logo in PDF form to cathaide@sophiaacademy.org
Please make checks payable to Sophia Academy and mail to:

**Sophia Academy
2880 Dresden Drive
Atlanta, Georgia 30341
Attn: Cathi Athaide
(404) 303-8722 (phone) / (404) 303-8883 (fax)**

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