



## **2024 Sponsorship Benefits and Levels**

### **\$20,000 Platinum Sponsorship**

- Preferred seating for up to 20 guests
- Drink service is included, with complimentary beer, wine and drinks throughout the evening
- Naming rights within the theatre during the show
- Inclusion in all online marketing, including website and social media
- Name or logo included on slide show playing pre-event start
- Live mentions throughout the event

### **\$10,000 Premier Sponsorship**

- Premier seating for up to 10 guests
- Drink service is included, with complimentary beer, wine and drinks throughout the evening
- Name or logo included on slide show playing pre-event start
- Live mentions throughout the event

### **\$5,000 Gold Sponsorship**

- First tier seating for 10 guests
- Drink service is included, with complimentary beer, wine and drinks throughout the evening
- Name included on slide show playing pre-event start

### **\$2,000 Silver Sponsorship**

- Seating for 10 guests
- Drink service is included, with complimentary beer, wine and drinks throughout the evening
- Name included on slide show playing pre-event start

### **\$200 For Individual Tickets**

- Drink service is included, with complimentary beer, wine and drinks throughout the evening



## 2024 Sponsorship Form

Sponsor/Company Name: \_\_\_\_\_  
(exactly as it should appear in printed materials)

Address: \_\_\_\_\_ City: \_\_\_\_\_

State: \_\_\_\_\_ Zip: \_\_\_\_\_

Contact Name: \_\_\_\_\_ Contact Phone: \_\_\_\_\_

Contact Email Address: \_\_\_\_\_

### Sponsorship Levels:

Please apply my sponsorship level to count as votes for (name of star or stars):

\_\_\_\_\_ \$20,000 Platinum    \_\_\_\_\_ \$5,000 Gold    \_\_\_\_\_ \$200 Individual Ticket  
\_\_\_\_\_ \$10,000 Premier    \_\_\_\_\_ \$2,000 Silver

Total Amount Due: \_\_\_\_\_ Tickets Needed: \_\_\_\_\_ Handicap Seating: Yes/No \_\_\_\_\_

### Method of Payment:

\_\_\_\_\_ Check Enclosed (made payable to WTRC)    \_\_\_\_\_ Credit Card  
\_\_\_\_\_ Send an Invoice (Circle One: Mail or Email)

Name on Card \_\_\_\_\_ Card # \_\_\_\_\_

CVV Code \_\_\_\_\_ Expiration Date \_\_\_\_\_

Signature \_\_\_\_\_

Please mail or email completed forms to:

Brilyn Daniels, WTRC  
bdaniels@wtrc.com  
3001 S. Jackson  
San Angelo, TX 76904  
325-340-3755