



UNIVERSITY HIGH SCHOOL OF SCIENCE AND ENGINEERING AFTER GRAD PARTY COMMITTEE

Sponsorship Opportunities

Benefit	Presenting (one)	Hawk Leader (unlimited)	Hawk Partner (unlimited)	Hawk Friend (unlimited)	Hawk Supporter (unlimited)
Investment	\$1,000+	\$500-\$999	\$250-\$499	\$100-\$249	\$5-\$99
Name as part of event ("Presented by")					
Name (and logo) included on all event materials					
Logo on web page					
Name on web page					
Donor promoted on AGP's Facebook account					
Name on signage at event					

Special Sponsorship Opportunities

Special sponsorship recognition exists for major donors of goods and services depending on the cash value of the donation. For more information contact Robin Guzauckas at 860-637-1057 or by email at uhsseagp@gmail.com

Designated Gift Options

You have the option to use your sponsorship to provide for a certain aspect of the event. All sponsors who designate their sponsor dollars will be recognized with specific signage at the event (i.e. "Video Games Sponsored By" signage at the Video Games station.)

Designation	Cost
Video Games	\$200
Tattoo Artist	\$400
Caricaturist	\$500
Balloon Artist	\$500
DJ	\$750
Photo Booth	\$750
Media Center Games / Trivia	\$750
Gifts / Prizes	\$1,500

For more information, please contact **Robin Guzauckas** at **860-637-1057** or by email at UHSSEAGP@gmail.com. To become a sponsor, complete attached form, make checks payable to UHSSE AGP, and mail to: UHSSE After Grad Party, Attn: Robin Guzauckas, 229 Hilltop Drive, Southington, CT 06489.



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Sponsorship Form

We are pleased to support UHSSE's hardworking graduating students with a night to remember by way of a safe, fun party just for them on the night of graduation.

- | | |
|--|-------------|
| <input type="radio"/> Presenting Sponsor | \$1,000+ |
| <input type="radio"/> Hawk Leader | \$500-\$999 |
| <input type="radio"/> Hawk Partner | \$250-\$499 |
| <input type="radio"/> Hawk Friend | \$100-\$249 |
| <input type="radio"/> Hawk Supporter | \$5-\$99 |

Name _____

Company _____

Address _____

City _____ State _____ Zip _____

Phone _____ Fax _____

E-mail _____

Amount _____ Designation _____

Name as you would like it to appear: _____

- Our check is enclosed.
- Our check will follow

(checks payable to UHSSE AGP)

RETURN THIS FORM TO:

UHSSE After Grad Party
Attn: Robin Guzauckas
229 Hilltop Drive
Southington, CT 06489

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