



WCDS (*Wakefield Country Day School*)  
A 501(c)3 Organization – 54-1595242  
1059 Zachary Taylor Hwy~PO Box 739~Flint Hill, VA 22627  
540-635-8555 main ~ 540-636-1501 fax  
lcarter@wcdsva.org

## **Sponsorship and Advertising Opportunities**

### **All Sponsorship packages include:**

- Recognition at the event
- Logo placement on all marketing materials (in-house and public)
- Logo placement on the event page of the WCDS website

### **Gold Sponsorship \$670**

Full-page color ad in event catalog  
Sponsor table for 8  
6 bottles of wine at table during dinner (3 red, 3 white)  
Signage displayed with your name during the event

### **Silver Sponsorship \$440**

Half-page color ad in event catalog  
Four (4) tickets  
4 bottles of wine at your place setting during dinner (2 red, 2 white)  
Signage displayed with your name during the event

### **Bronze Sponsorship \$220**

Quarter-page ad in event catalog  
Two (2) tickets  
2 bottles of wine (1 red, 1 white)  
Signage displayed with your name during the event

### **Bid Paddle Advertisement \$300**

Color Logo/Name on every bid paddle (*only one bid paddle opportunity available*)

### **Full-Page Advertisement \$ 75**

Color, 5.25" x 8.25"

### **Half-Page Advertisement \$ 50**

Color, 5.25" x 4.25"

### **Quarter-Page Advertisement \$ 25**

Color, 2.625" x 4.25"

**Logo and advertisement information must be received *BEFORE* April 13, 2018.**

Contact Laura Carter at 540-635-8555, ext. 232 or lcarter@wcdsva.org

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**Deadline is Thursday, April 12, 2018.**

Advertising/Sponsorship Name \_\_\_\_\_  
(*This is the name that will appear in the catalog & on signage*)

Address \_\_\_\_\_

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

Phone \_\_\_\_\_ Email \_\_\_\_\_

Authorizing Signature \_\_\_\_\_

Authorizing Name \_\_\_\_\_ Date \_\_\_\_\_

Contact Name & Phone \_\_\_\_\_  
(*If different than listed above*)

Sponsorship Level \_\_\_\_\_ \$ \_\_\_\_\_

Advertising Level \_\_\_\_\_ \$ \_\_\_\_\_

I would like to make a donation to WCDS \$ \_\_\_\_\_

**Checks payable to WCDS (note Auction in the memo).  
Complete the following information to pay by Credit Card (VISA/MasterCard).**

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

Card # \_\_\_\_\_ Exp. Date \_\_\_\_\_

CCV Code \_\_\_\_\_ Signature \_\_\_\_\_

Billing Address \_\_\_\_\_  
(*if different than above*)

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