



3rd Annual Fundraising Gala

# Where the *heart* is

Caring for Those Who Cared for Us

October 7, 2025



**SPONSORSHIP OPPORTUNITIES**





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## SPONSORSHIP OPPORTUNITIES

Sponsorship Benefits	Presenting Sponsor \$50,000	Compassion Investor \$25,000	Community Investor \$10,000	Mission Investor \$5,000
<b>Night of the Event</b>				
Seating	Table for 12 guest	Table for 8 guests	Table for 6 guests	Table for 4 guests
Screen recognition	Prime Recognition	Preferred recognition	Featured recognition	Recognition
Speaking role	X			
<b>Advertising and Promotion</b>				
Recognition on all print and digital materials	Prime recognition as presenting sponsor	Preferred recognition	Featured recognition	Listing
Pre-recorded video message for social media	1-minute	45 Seconds		
Program book (deadline for inclusion: Monday, September 15)	Full-page ad, best placement	Full-page ad, special placement	Full-page ad	Half-page ad
Donor name on delivery vehicle for 1 year	X			
Donor name and link on Ethos website for 1 year	X	X	X	X
<b>Additional Value</b>				
A complimentary Lunch & Learn Session offered on location to educate and inform employees and/or members about caring for an elder at home and services that are available throughout Greater Boston.				
	X	X	X	

Become a donor: [www.ethocare.org/gala2025](http://www.ethocare.org/gala2025)



## REPLY FORM

Company/Donor Name *Please list the name(s) exactly as they should appear in print.*

Contact Name

Title

Address

City

State

Zip

Email Address

Telephone

### WE/I WOULD LIKE TO SUPPORT ETHOS:

- ☐ CARE INVESTOR - \$50,000      ☐ COMMUNITY INVESTOR - \$10,000      ☐ OTHER \$ \_\_\_\_\_
- ☐ COMPASSION INVESTOR - \$25,000      ☐ MISSION INVESTOR - \$5,000

Deadline for ad submission & video files is Monday, September 15

*Please see the Investment Opportunities page for full description of the benefits.*

Checks should be made payable to Ethos.

### PAYMENT OPTIONS

- ☐ I will mail our/my gift of \$ \_\_\_\_\_ to Ethos, 555 Amory Street, Jamaica Plain MA, 02130-2672
- ☐ Please invoice the address above
- ☐ I will recommend a grant from my Donor Advised Fund
- ☐ Please charge my credit card with the information below:

**SECURE ONLINE PAYMENT:**  
**[ethocare.org/gala2025](https://ethocare.org/gala2025)**

AMEX/Mastercard/VISA/Discover Number

CVV#

Expiration Date      \$  
Amount

Signature

### PLEASE REPLY ONLINE OR RETURN THIS REPLY FORM, IDENTIFYING YOUR LEVEL OF COMMITMENT TO:

[qnguyen@ethocare.org](mailto:qnguyen@ethocare.org) or mail to  
Ethos, 555 Amory Street, Jamaica Plain MA, 02130-2672

Ethos is designated a 501(c)3 tax-exempt organization under the IRS revenue code.  
Donations are tax-deductible to the full extent of the law. Tax ID #23-7304163

