

## DINNER TICKETS AND SPONSORSHIP OPPORTUNITIES

Your support of the 25th Annual Robert Novak Journalism Fellowship Awards Dinner will foster the careers of the next generation of top-notch journalists, while honoring today's leaders who are paving the way. If you would like to become a sponsor, purchase a dinner ticket or make a special gift in support of the Novak Fellowship or Rago Memorial Fellowship Program, please complete and return this form to: The Fund for American Studies, c/o Jane Mack, 1706 New Hampshire Ave. NW, Washington, DC 20009 or visit [TFAS.org/Novak18](http://TFAS.org/Novak18) to make a gift online. You may also contact Jane at 202.986.0384 or [jmack@TFAS.org](mailto:jmack@TFAS.org) for questions and to arrange sponsorships via email or telephone.

### SPONSORSHIP LEVELS

#### \_\_\_\_\_ \$50,000 CHAIRMAN'S CIRCLE

##### **Sponsorship Benefits:**

- VIP seating for two at Chairman's Table
- Additional VIP seating as requested
- Top listing in dinner program
- Photos with honorees and distinguished guests
- Recognition on event marketing and website

#### \_\_\_\_\_ \$25,000 PLATINUM CIRCLE

##### **Sponsorship Benefits:**

- VIP seating for eight
- Featured listing in dinner program
- Photos with honorees and distinguished guests

#### \_\_\_\_\_ \$10,000 GOLD SPONSOR

##### **Sponsorship Benefits:**

- VIP seating for eight
- Listing in dinner program

#### \_\_\_\_\_ \$5,000 SILVER SPONSOR

##### **Sponsorship Benefits:**

- Priority seating for four
- Listing in dinner program

\_\_\_\_\_ Yes, I wish to be a sponsor of the 25th Annual Robert Novak Journalism Fellowship Awards Dinner  
(Please check one of the sponsorship options above)

\_\_\_\_\_ Yes, I would like to attend the dinner. I'd like to purchase \_\_\_\_\_ number of tickets at \$500 per ticket.

\_\_\_\_\_ Yes, I would like to make a special gift in the amount of \$\_\_\_\_\_.

Total amount to charge: \$\_\_\_\_\_

I would like to designate my sponsorship/gift to (check one or both)

Robert Novak Journalism Fellowship Program

Joseph Rago Memorial Fellowship for Excellence in Journalism Program

### PAYMENT INFORMATION

Check enclosed     Visa     MasterCard     American Express     Discover

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

Card Number \_\_\_\_\_ Expiration Date \_\_\_\_\_

Email Address \_\_\_\_\_ Phone Number \_\_\_\_\_

Card Holder Signature \_\_\_\_\_ Date \_\_\_\_\_