



FRIDAY  
**MAY 1<sup>ST</sup>**  
ANGUS BARN  
PAVILION  
RALEIGH, NC



13<sup>TH</sup> ANNUAL  
*Champions  
for Children*  
**Gala**  
2026  
SPONSORSHIP  
OPPORTUNITIES



**5:30 PM**  
Reception &  
Silent Auction  
**6:30 PM**  
Dinner & Program  
*[Business Cocktail Attire]*

• **PREMIER - \$25,000**

All SIGNATURE opportunities but with Two priority reserved tables with 16 seats  
Greetings to gala audience  
Gala honoree introductions  
Full front cover ad (first to respond)  
Full first page ad (second to respond)  
Invited to exhibit at NCFPSC events

• **SIGNATURE - \$15,000**

All CHAMPION opportunities including One priority reserved table and 8 seats  
Full page color ad in program  
Recognition on homepage of NCFPSC website  
Logo or Ad in NCFPSC newsletters  
Included in promotional medium  
Additional seats by request and availability.

• **CHAMPION - \$10,000**

All ADVOCATE opportunities including reserved table and 8 event tickets  
Full page color ad in program  
Logo or Ad in NCFPSC newsletters  
Additional seats by request and availability.

• **ADVOCATE - \$5,000**

One reserved table and 8 event tickets  
Recognition at gala  
Full page color ad in program  
Logo on NCFPSC website and newsletters  
Additional seats by request and availability.

• **SUPPORTER - \$2,500**

4 event tickets  
Recognition at gala  
One-half page color ad in program  
Logo on NCFPSC website and newsletter  
Additional seat by request and availability.

• **FRIEND - \$1,000**

2 event tickets  
Recognition at gala  
One-quarter color ad in program  
Logo on NCFPSC website and newsletter

SPONSOR NAME(S)

I agree to sponsor the Champions for Children Gala as a (please select one):

- \$25,000 Premier  \$15,000 Signature  \$10,000 Champion  
 \$5,000 Advocate  \$2,500 Supporter  \$1,000 Friend

AND/OR (please check all that apply):

- I will Purchase \_\_\_\_\_ (total number of) seats at \$250 each  
 Sponsor a Teacher to Attend - \$250 each  
 Donate \$ \_\_\_\_\_  
 Donate an item to the Silent Auction.

Items:

Contact Name

Email

Phone

PAYMENTS - Please select a payment option:

- Check payable to NCFPSC and mailed to address in lower box;  
 Credit Card via NCFPSC.org

I will complete payment by this date

COMMENTS:

Sponsor Signature

Date