



2017-18 YOUTH PROGRAM SPONSORSHIP OPPORTUNITIES

Platinum Glove \$25,000

- Company/logo on
 - Banner for 1 year
 - Logo on workout t-shirt for the girls
 - Social Media/ Website
- Funding to provide 1 year program service:
 - Scholarship for underprivileged and under represented students
 - Materials and supplies
 - Transportation to and from the various sites
- Boxing Session for 10 employees at corporate site/facility
- Seating for 10 guests at the 2018 Heartbeats Gala

Gold Glove \$10,000

- Company/logo on
 - Banner for 1 year
 - Social Media/ Website
- Funding to provide 1 year program service:
 - Scholarship for underprivileged and under represented students
 - Materials and supplies
 - Transportation to and from the various sites
- Seating for 10 guests at the 2018 Heartbeats Gala

Silver Glove \$5,000

- Company/logo on
 - Banner for 1 year
 - Social Media/ Website
- Funding to provide 1 year program service:
 - Scholarship for underprivileged and under represented students
 - Materials and supplies
 - Transportation to and from the various sites

Bronze Glove 2,500

- Company/logo on
 - Social Media/ Website
- Funding to provide 1 year program service:
 - Scholarship for underprivileged and under represented students
 - Materials and supplies
 - Transportation to and from the various sites

Gym Bag Sponsor: \$1500

- Supply 20 children with their very own Gym bag that will include all the equipment needed + their first month fees to start a journey of becoming a Total Knockout!

In Her Corner Sponsor: \$500

- Supply 1 girl with the ability to join Total K.O. Boxing after school program for a full year free of charge





SPONSORSHIP OPTIONS:

Please select your level of involvement

Platinum Glove \$25,000

Bronze Glove \$2,500

Gold Glove \$10,000

Gym Bag \$1,500

Silver Glove \$5,000

In Her Corner \$500

CONTACT INFORMATION:

Company Name: _____

Contact Name: _____

Address: _____

Contact number: _____ Email: _____

PAYMENT OPTIONS:

Check (Make check payable to Total K.O. Boxing Club)

Please send invoice

Credit card

Amount to be charge: _____

Visa

MC

Discover

American Express

Cardholder: _____

Address: _____

Card number: _____

Expiration date: _____ CCV: _____ Cardholder signature: _____

Name and Logo for all materials

Please use the following name(individual, corporation, or foundation) for all benefits pertaining to the Total K.O. Youth Program (print exactly as it should appear)

Email preferred logo(high-res png/jpeg) and/or website link for publication listing to Jonathan Saentz at j.saentz@tkoboxingclub.org

