



NIGHT OF STARS, ILLUMINATING FUTURES

SPONSORSHIP FORM

Please indicate your desired sponsorship level by checking one of the following

- | | | |
|-----------------------------------|---------|--|
| ☐ Diamond | \$5,000 | (reserved table includes 10 event tickets) |
| ☐ Platinum | \$2,500 | (8 event tickets) |
| ☐ Gold | \$1,500 | (6 event tickets) |
| ☐ Silver | \$1,000 | (4 event tickets) |
| ☐ Bronze | 500 | (2 event tickets) |

(Sponsors will be recognized via social media, program advertising, as well as during the event)

SPONSOR INFORMATION

Company/Organization: _____

Contact Name: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Email: _____ Phone: _____

Check Amount: _____ (please include this form with your payment)

Final event attendee details will be requested two weeks prior to the event on February 11, 2027

BEST CONTACT INFORMATION

Mail Check to:

Beaumont Educational Support Team

P.O. Box 261, Beaumont CA 92223

501(c)(3) Tax ID# 46-4150701

For additional information contact:

Susan Aguilar-Martinez

saguilarmartinez@beaumontusd.k12.ca.us

(480) 363-0149

or, use this code to pay with a credit card

