

SPONSORSHIP BENEFITS	<b>\$2,500</b> BUILDER	<b>\$5,000</b> LEADER	<b>\$10,000</b> VISIONARY	<b>\$20,000</b> TRANSFORMER
Recognition on event signage at five opening receptions (1,500 attendees)	~	~	~	~
Company name on a gallery title wall for one exhibition run; recognition on exhibition promotional materials (400 visitors; 25,000 email subscribers)		~		
Company name on a gallery title wall in four galleries for one exhibition run; recognition on exhibition promotional materials (1,600 visitors; 25,000 email subscribers)			~	
Company name on a gallery title wall for one year and recognition on exhibition promotional materials (10,000 visitors; 25,000 email subscribers)				~
Recognition on VisArts donor wall for one year (20,000 visitors)	~	~	~	~
Recognition on VisArts website (14,000 monthly hits)	~	~	~	~
Employee discounts on select classes and camps with a discount code		~	~	~
Facility rental discounts, subject to availability		5% All days	10% Weekdays	10% All days
Logo on VisArts tote bags (3,000 bags)		~	~	~
Please respond by February 15 to receive logo recognition on tote bags. Sponsors may be recognized on gallery title walls up to				

one month prior to exhibition opening.



The **VisArts Gallery** Program seeks to build diverse audiences for the arts, while supporting artists and their work. Each year, VisArts presents 25 contemporary exhibitions and engages more than 100 artists. Artist residencies and fellowships offer free or subsidized studio space, stipends, exhibition opportunities and training. InsideArt delivers workshops, artist talks, and gallery tours. All sponsorship proceeds benefit VisArts gallery programs and initiatives, keeping our galleries free and accessible for all. For more: **www.visartscenter.org/exhibitions** 



## Sponsorship Level (please check box)

- \$2,500 Builder
- □ \$5,000 Leader
- \$10,000 Visionary
- \$20,000 Transformer

## **Payment Information**

Enclosed is my check for \$	(payable to VisArts).
To pay by credit card, visit visartscente	r.org/sponsor-an-event, or charge my card in the
amount of \$	
Card type (select one):Visa	MasterCardAMEX
Card number:	Name on card:
Expiration date: / (mm/yy)	CVV: (number on the back of the credit card)
Contact Information	
Name:	Title:
Organization:	
Address:	
Phone:	Email:

Please return this form via email to switting@visartscenter.org, or mail to: VisArts, 155 Gibbs Street, Suite 300, Rockville, MD 20850

VisArts is a 501 (c)3 organization. All contributions to VisArts are tax deductible to the extent allowed by law.