



Van Metre Polo Cup

to benefit Capital Caring and
The National Center for Missing and Exploited Children

Saturday, June 21, 2014

at Great Meadow

5089 Old Tavern Road, The Plains, VA 20198

www.VanMetrePoloCup.com

There are several levels of giving as indicated below. Funds raised will go to supporting Capital Caring's new inpatient center, The Adler Center on the Van Metre Campus, in Loudoun County.

Polo Cup Donation/Pledge Form

Platinum —\$25,000

- Field Day/Event Sponsor
- Four persons invited to a private, night before dinner party with celebrities
- Two premier tables of ten which includes cocktails and lunch
- Prominent signage at event
- Public relations effort to highlight company's participation including website recognition
- Corporate logo listed on invitation and logo on program
- Full page ad and company profile in program

Gold —\$15,000

- Prominent billing in every aspect of the program
- Two premier tables of ten, which includes cocktails and lunch
- Logo on program
- Corporate name on invitation
- Signage at event
- Public relations effort to highlight company's participation including website recognition
- Full page ad in program

Silver —\$10,000

- One premier table of ten, which includes cocktails and lunch
- Signage at event
- Corporate/individual name on invitation and program
- Full page ad in program

Bronze —\$5,000

- Ten tickets (a table) to event with preferred seating, which includes cocktails and lunch
- Individual/corporate name in invitation and program
- Full page ad in program

Champion —\$2,000

- Ten tickets (a table) to event, which includes cocktails and lunch
- Individual/corporate name in invitation and program

Benefactor —\$1,000

- Five tickets to event with preferred seating, which includes cocktails and lunch
- Individual/corporate name in invitation and program

Friend —\$200

- One Tailgate spot with an umbrella table & 4 chairs
- Additional guests for \$15 each up to six guests

General Admission —\$30

- Admits one car

Dove Release —\$20

- Name mentioned in honor or memory of during the dove release

In honor of: _____

In memory of: _____

I/We cannot attend the event this year. However, I wish to make a contribution to show my support. I've included my check (payable to Capital Caring) for \$_____ or please charge my credit card for \$_____.

Enclosed is my check made payable to **Capital Caring** for \$_____.

Please charge my credit card: Visa Master Card American Express

Name on Card

Card Number

Expiration Date

Signature

Telephone

CVV

Reservation Information

Please return this form to: Capital Caring--Polo Cup, 2900 Telestar Court, Falls Church, VA 22042
or fax to 703-538-2073, Attn: Steven Titlebaum, or email to stitlebaum@capitalcaring.org

Sponsor Name (as you would like it to appear in the Program)

Contact Name

Address

City

State

Zip

Telephone

Email

Guests at my table:

1.

2.

3.

4.

5.

6.

7.

8.

9.

10.

For additional information, please contact Steven Titlebaum, 703-531-2383
or email at stitlebaum@capitalcaring.org