



## Sponsorship Commitment Form

Name/Organization: \_\_\_\_\_

Contact Person: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

**Recognition Name** (*as you would like it to appear in materials*):

\_\_\_\_\_



### Sponsorship Levels & Benefits (*Please select one*)

☐ ROYAL COURT – \$25,000 (Presenting Sponsor)

☐ KREWE CAPTAIN – \$15,000

☐ JAZZ LEGEND – \$10,000

☐ BIG EASY BENEFACTOR – \$5,000

☐ SECOND LINE STAR – \$2,500

### Payment Method

☐ Check enclosed  
(payable to Black Ensemble Theater)

☐ Please invoice me

☐ I will pay online at

[blackensembletheater.org/gala2025/](https://blackensembletheater.org/gala2025/)