A Journey through Sand and Stars

39th Annual Fall Fashion Show Luncheon
Benefiting
The Crawford – Zbanek Scholarship Foundation
South Shore Harbour Resort Conference Center
Thursday, 6 November 2025

Donor Name or Organization

Person to Contact

Phone (Circle One: cell work home)

Mailing Address City State Zip

Email Address:

If your company has matching funds, please enclose a completed matching gift form.

Please choose your sponsorship/underwriting donation by circling one of the selections below.

Sponsorships

	Diamond	Platinum	Pearl	Gold	Silver	Bronze	Friend
Benefit/Donation	$8000	$5000	$2500	$1000	$500	$250	$100
Runway Seats	10	7	4	2			
General Seating					2	1	
Program Ad	Full Page	Full Page	Full Page	½ page	¼ page	Business Card	
Recognition*	PR, M, E, P	M, E, P	M, E, P	E, P	E, P	P	P

	Printed Material	Lights and Sounds	Champagne	Wine		Decorations	Wine Pull	Postage	Table Favors
				Red	White				
Benefit/Donation	$3000	$2500	$2500	$1000 each		$1000	$750	$750	$500
Runway Seats	5	4	4	2 each		2			
General Seating							3	2	2
Program Ad	Full Page	Full Page	Full Page	½ page each		½ page	¼ page	¼ page	¼ page
Recognition*	M, E, P	M, E, P	M, E, P	E, P each		E, P	E, P	E, P	E, P

***Recognition Symbols: PR – Press Release, M – MC, E – Event Signage, P – Program Listing**

Advertisements
300 dpi, .jpg or .pdf format ONLY

	Cost	Color	Size
Back Cover	$500	X	8.5x11
Front Inside	$400	X	8.5x11
Back Inside	$350	X	8.5x11
Full	$250	-	8x10.5
Half	$150	-	8x5.125
Quarter	$75	-	3.875x5.125
Business Card	$50	-	3.875x2.5

Send ads in digital format by e-mail to clapaprogram@gmail.com. Questions regarding ads, contact clapaprogram@gmail.com. Return this form, ad instructions, credit card information or check payable to "Crawford-Zbanek Scholarship Foundation" to: **Crawford-Zbanek Scholarship Foundation Benefit, P.O. Box 58355, Webster, TX 77598-8355**. Deadline for print-ready ads, payments and program recognition is 10/14/2025. Ads that require design work are due by 10/01/2025. Payment must be received for ads to be included.

Panhellenic Member Contact:_____

Payment received by: _____ **Check No:**_____ **Amount:**_____
Date:_____

Card Number

Exp Date_____/_____ **Security Code**_____ **Billing Zip code** _____ **Amount Charged**_____

Name_____

Signature

Date _____

The Crawford-Zbanek Scholarship Foundation is a 501(c)(3) organization. Your donation is tax-deductible to the extent of the law.
THANK YOU FOR SUPPORTING THE CRAWFORD-ZBANEK SCHOLARSHIP FOUNDATION