



2019 UNDERWRITING CONTRACT

The Crystal Charity Ball - December 7, 2019

NAME _____

ADDRESS _____ CITY/STATE _____ ZIP _____

E-MAIL _____ PHONE _____

PERSON TO RECEIVE ALL BENEFITS (INCLUDING BALL AND UNDERWRITING PARTY INVITATIONS)

Those donors who have committed by October 1 at the Angel Level and above will receive an invitation for two to the Underwriter's Party.

NAME _____ E-MAIL _____ PHONE _____

ADDRESS _____ CITY/STATE _____ ZIP _____

CRYSTAL CHARITY PRINTING AND PUBLICATIONS **PRINT EXACTLY AS NAME SHOULD APPEAR AND CIRCLE ONE ALPHABETIZING LETTER**

Please use the following name for Underwriter listing in all Crystal Charity Ball publications.

NAME _____ OR I (We) prefer not to be listed in any printed materials.

*PLEASE NOTE THE CHILDREN'S BOOK PAGE UNDERWRITING BENEFIT MAY NOT BE AVAILABLE AFTER PROOF DEADLINE - TUESDAY, SEPTEMBER 3, 2019
IF YOUR DONATION LEVEL INCLUDES A CHILDREN'S BOOK PAGE AND YOU ARE ACCEPTING THAT BENEFIT, PLEASE COMPLETE THE RED CHILDREN'S BOOK FORM.

ANGEL OF LIGHT (\$500,000 to \$999,999)

ACCEPT DECLINE

- Two Ball Seats for every \$5,000 donated (up to 30)
- Children's Book Page (COMPLETE RED CHILDREN'S BOOK FORM)*
- Gift delivered week of Ball
- Twenty-Five Gold Contribution Tickets
- Two limousines to/from Ball OR Suite (Circle One)
- Invitation for two to Circle of Angels Dinner

ANGEL OF HOPE (\$250,000 to \$499,999)

ACCEPT DECLINE

- Two Ball Seats for every \$5,000 donated (up to 30)
- Children's Book Page (COMPLETE RED CHILDREN'S BOOK FORM)*
- Gift delivered week of Ball
- Twenty-Five Gold Contribution Tickets
- Two limousines to/from Ball OR Suite (Circle One)
- Invitation for two to Circle of Angels Dinner

GILDED ANGEL (\$100,000 to \$249,999)

ACCEPT DECLINE

- Two Ball Seats for every \$5,000 donated (up to 20)
- Children's Book Page (COMPLETE RED CHILDREN'S BOOK FORM)*
- Gift delivered week of Ball
- Twenty Gold Contribution Tickets
- One limousine to/from Ball OR Suite (Circle One)
- Invitation for two to Circle of Angels Dinner

GABRIEL'S ANGEL (\$50,000 to \$99,999)

ACCEPT DECLINE

- Two Ball Seats for every \$5,000 donated (up to 20)
- Children's Book Page (COMPLETE RED CHILDREN'S BOOK FORM)*
- Gift delivered week of Ball
- Fifteen Gold Contribution Tickets
- Invitation for two to Circle of Angels Dinner

GUARDIAN ANGEL (\$25,000 to \$49,999)

ACCEPT DECLINE

- Two Ball Seats for every \$5,000 donated
- Children's Book Page (COMPLETE RED CHILDREN'S BOOK FORM)*
- Gift delivered week of Ball
- Ten Gold Contribution Tickets
- Invitation for two to Circle of Angels Dinner

ARCHANGEL (\$15,000 to \$24,999)

ACCEPT DECLINE

- Two Ball Seats for every \$5,000 donated
- Children's Book Page (COMPLETE RED CHILDREN'S BOOK FORM)*
- Ten Gold Contribution Tickets

CRYSTAL ANGEL/CHILDREN'S BOOK (\$10,700 to \$14,999)

ACCEPT DECLINE

- Four Ball Seats
- Children's Book Page (COMPLETE RED CHILDREN'S BOOK FORM)*
- Five Gold Contribution Tickets

CRYSTAL ANGEL (\$10,000 to \$14,999)

ACCEPT DECLINE

- Four Ball Seats
- Five Gold Contribution Tickets

ANGEL/CHILDREN'S BOOK (\$5,700 to \$9,999)

ACCEPT DECLINE

- Two Ball Seats
- Children's Book Page (COMPLETE RED CHILDREN'S BOOK FORM)*

ANGEL (\$5,000 to \$9,999)

ACCEPT DECLINE

- Two Ball Seats

UNDERWRITING/CHILDREN'S BOOK (\$3,000 to \$4,999)

ACCEPT DECLINE

- Children's Book Page (COMPLETE RED CHILDREN'S BOOK FORM)*

UNDERWRITING (Up to \$4,999)

ACCEPT DECLINE

- Recognized in printed publications

RETAIN A COPY OF THIS CONTRACT FOR YOUR RECORDS.

MAKE ALL PAYMENTS PAYABLE TO THE CRYSTAL CHARITY BALL AND MAIL TO:

Shelle Sills, Underwriting Chairman
The Crystal Charity Ball - Two Turtle Creek
3838 Oak Lawn Avenue, Suite L150 - Dallas, Texas 75219

UNDERWRITER'S SIGNATURE

CCB MEMBER _____

PHONE _____ DATE _____

PAYMENT INFORMATION AMOUNT OF CONTRIBUTION \$ _____

- FULL PAYMENT ENCLOSED
- BILL ME FULL PAYMENT DUE SEPTEMBER 2, 2019
- BILL ME HALF PAYMENTS DUE JUNE 3 / SEPTEMBER 2, 2019

BILLING ADDRESS _____

PLEASE CHARGE MY (CHECK ONE) MASTERCARD VISA CREDIT CARD # _____ EXP. DATE _____

NAME ON CARD _____ PHONE _____



2019 CHILDREN'S BOOK INFORMATION FORM

The Crystal Charity Ball - December 7, 2019

PLEASE COMPLETE THIS FORM IF YOU ARE AN UNDERWRITER ACCEPTING THE CHILDREN'S BOOK PAGE BENEFIT.

NAME _____ E-MAIL _____ PHONE _____

ADDRESS _____ CITY/STATE _____ ZIP _____

PLEASE CHECK UNDERWRITING LEVEL

- ANGEL OF LIGHT
\$500,000-\$999,999
- GILDED ANGEL
\$100,000-\$249,999
- GUARDIAN ANGEL
\$25,000-\$49,999
- CRYSTAL ANGEL/
CHILDREN'S BOOK
\$10,700-\$14,999
- UNDERWRITER/
CHILDREN'S BOOK
\$3,000-\$4,999
- ANGEL OF HOPE
\$250,000-\$499,999
- GABRIEL'S ANGEL
\$50,000-\$99,999
- ARCHANGEL
\$15,000-\$24,999
- ANGEL/CHILDREN'S BOOK
\$5,700-\$9,999

PHOTOGRAPHY OPTIONS (CHOOSE ONE) THERE WILL BE NO PLACEMENT GUARANTEES

- A. USE OFFICIAL CHILDREN'S BOOK PHOTOGRAPHER***
The Crystal Charity Ball encourages use of official photographers who waive their sitting fees for CCB Underwriters.
 GITTINGS HOLT HAYNSWORTH
 JAMES FRENCH JOHN DERRYBERRY
- B. USE A PHOTO FROM A BENEFICIARY CHARITY**
Photos taken by official Children's Book photographers
- C. USE ALTERNATE PHOTOGRAPHER**
NAME _____ PHONE _____
EMAIL _____

Person photographer contacts to arrange sitting:
NAME _____ PHONE _____
EMAIL _____

Sitting to be completed by **WEDNESDAY, AUGUST 28, 2019**.
Proofs to be selected by **TUESDAY, SEPTEMBER 3, 2019**.

*Sittings completed by May 31 with proof selection by June 14 will receive a 20% discount on portraits with official Children's Book photographers.

All Alternate photographer photos must be submitted before July 30, 2019 to meet print deadlines.
Submit a 300 dpi, CMYK 6"x 6" color digital image on a labeled disc or thumb drive to The Crystal Charity Ball office or send an e-mail to bshaw@crystalcharityball.org. **Donor** is responsible for submitting the Client Information Form. Collage photos will not be accepted.

PUBLICATION OPTIONS

EXACT PRINTING of children's names and positions in the picture are based on the Client Information Form, supplied by the **photographer** and completed by the donor when proof is selected. (SEE ITEM 1 BELOW)

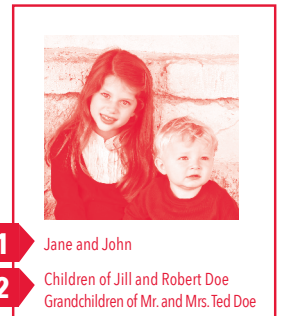
1 _____

NAME	AGE	GENDER	NAME	AGE	GENDER
_____	_____	_____	_____	_____	_____
NAME	AGE	GENDER	NAME	AGE	GENDER
_____	_____	_____	_____	_____	_____

Donor's name to be indexed? _____
YES NO CIRCLE ONE ALPHABETIZING LETTER

Donor's name to appear under children's photo? (SEE ITEM 2)
YES NO If yes, print below (Example: "Children of..." "Grandchildren of..." "Compliments of..."
If left blank, the previous year's listing will be used. Marketing tag lines will not be accepted.

2 _____



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Shelle Sills, Underwriting Chairman
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3838 Oak Lawn Avenue, Suite L150 - Dallas, Texas 75219

UNDERWRITER'S SIGNATURE
CCB MEMBER _____
PHONE _____ DATE _____