

Sponsorship / Tickets By Mail 2025

Coffee Welcome 8:30-9:00am Program 9:00-10:30am Palm Springs Convention Center, 277 N. Avenida Caballeros (o) 760-416-8711 | (fax) 760-444-3270 | www.pspride.org

Checks or Zelle only. No services fees on orders by mail.

I'd like to honor the memory of Harvey Milk by securing the following:

Diversity Breakfast

Thursday, May 8, 2025

- \$95 General Admission Breakfast Seating. Enter number of Tickets ______ x \$95 = \$ \boxtimes
- \$95 Send A Student. Enter number of Tickets _____x \$95 = \$ _____ 100%Charitable contribution
- \$750 Student Team Sponsor. Enter Qty ____ x \$750 = \$ _____ 100%Charitable contribution (Eight Coachella Valley high school students will be hosted at the breakfast and your name or company name will be listed in the printed program and online as a Student Team Sponsor.)
- \$750 Table Sponsor. Enter Qty _____ x \$750 = \$ ____ (includes table & breakfast for eight and Table Sponsor listing in printed program) \$1,000 Bronze Sponsor. Enter Qty____ x \$1,000 = \$ ____ X
 - (includes table & breakfast for eight, Bronze Sponsor listing in printed program and name on table sign).
- *\$2,500 Silver Sponsor. 🛛 *\$5,000 Gold Sponsor. X
- *\$10,000 Platinum Sponsor. X *\$15,000 Coffee Welcome Sponsor.
- \Box *\$25,000 Presenting Sponsor.
- Other Sponsor Level & amount from deck ENTER ITEM & AMOUNT HERE X

Proceeds benefit Coachella Valley LGBTQ youth related programs.

*(Silver and above sponsorship includes priority table placement & breakfast for eight, sponsor level listing, pro-portional logo in printed program, recognition on table sign.) Please email a hi-res color jpg logo to Milk@pspride.org

My check in the amount of \$ _ payable to Palm Springs Pride is enclosed. I'm sending payment to Palm Springs Pride by ZELLE - ron@pspride.org

Return this form to MILK@pspride.org.

Tickets are not issued for this event. Guest Names will be listed at the Registration Table as you provide below.

Print Name		COMPANY / ORGANIZATION NAME FOR TABLES & SPONSORS
		Guest Names:
Address		1
City, State, Zip		2
Telephone		3
EMAIL (required for charitab <i>payment</i> confirmation		4 5
Make Check payable and mail to:	Palm Springs Pride 329 W. Mariscal Rd Palm Springs, CA 92262	6
Send Payment via Zelle:	ron@pspride.org	/
Payment may only be made via mail to the address above.		8
A 501(c)(3) organization Tax ID # 330745940		Please email guest names to ron@pspride.org or attach a complete list of names with your order.