

89.3 wrkf

FOUNDERS LUNCHEON

NINTH ANNUAL

WITH

Mary Louise Kelly
OF ALL THINGS CONSIDERED

FRIDAY, SEPT. 26 AT NOON
CROWNE PLAZA
4728 CONSTITUTION AVE.
BATON ROUGE, LA 70808

YES! I'd like to be a part of WRKF'S
Annual Founders Luncheon.

TABLES:

☐ SUPPORTING SPONSORSHIP: \$2,100

- Access for 10 guests to VIP reception with Mary Louise Kelly
- Table for 10 with a sign in your or your company's name
- Logo on event web page, social media, table rounds, and event presentation screens

☐ TABLE SPONSORSHIP: \$1,300

- Table for 10 with a sign in your or your company's name
- Name on event web page, social media, table rounds, and event presentation screens

TICKETS:

☐ GENERAL ADMISSION TICKET: \$160

(For non-members and the general public)
One seat at any open-seating table

☐ WRKF MEMBER TICKET: \$125

(Available exclusively to current WRKF members)
One seat at any open-seating table

DONATION ONLY:

I want to help keep WRKF a vital source of information, public safety, and entertainment - even if I can't attend the luncheon.

☐ DISTINGUISHED DONOR \$500:

Recognition on event web page, social media,
table rounds, and event presentation screens

☐ OTHER AMOUNT

\$ _____

MAJOR SPONSORSHIPS:

Inquire about major sponsorship opportunities

Register at wrkf.org/events or return your completed form and payment to:
WRKF Baton Rouge Public Radio, 3050 Valley Creek Drive, Baton Rouge, LA 70808
WRKF is a nonprofit 501(c) (3) organization. Tax ID: 72-0776781

DETACH AND RETURN WITH PAYMENT

TICKET OR TABLE TYPE

☐ SUPPORTING SPONSOR

☐ GENERAL ADMISSION TICKET - QUANTITY # _____

☐ DISTINGUISHED DONOR

☐ TABLE SPONSOR

☐ WRKF MEMBER TICKET - QUANTITY # _____

☐ OTHER DONATION

TOTAL \$ _____

☐ CHECK ENCLOSED

(PAYABLE TO WRKF)

CHECK # _____

☐ CREDIT CARD

CREDIT CARD # _____

EXPIRATION _____

CONTACT NAME _____

COMPANY NAME (IF APPLICABLE) _____

EMAIL ADDRESS _____

PHONE # _____

MAILING ADDRESS _____

NAME FOR TABLE SIGN (IF APPLICABLE) _____

IF YOU HAVE ANY QUESTIONS, PLEASE CONTACT: Barbara Clark, (225) 926-3050 Ext.113; Barbara@wrkf.org

FOR OFFICE USE ONLY:

DATE RECEIVED _____

AMOUNT ENCLOSED _____

PMT TYPE _____

CHECK # _____