



Representative Jamie Raskin
Judith Heuman Champion of
Justice Awardee



Dr. Harolyn Belcher
Distinguished Public Service in
Healthcare Awardee



Gregg Beratan, Ph.D



Alice Wong



Andrew Pulrang

Gayle Hafner Grassroots Advocacy Awardees

Disability Rights Maryland

Cordially Invites you to the

2021 Breaking Barriers

Virtual Awards Gala

Thursday, November 18, 2021, 6:30pm

[Click here](#) for DRM's website and a [text version](#)

SPONSORSHIP OPPORTUNITIES

Disability Rights Maryland

2021 BREAKING BARRIERS VIRTUAL AWARDS GALA

Thursday, November 18, 2021, 6:30pm

Sponsor Benefits	Legacy \$25,000	Platinum \$15,000	Gold \$10,000	Silver \$7,500	Bronze \$5,000	Patron \$2,500	Partner \$1,000
Marketing Visibility							
Video During Virtual Event	90 sec	30 sec	15 sec				
Logo at Opening & Closing Credits	10 sec	5 sec	3 sec	✓	✓	✓	✓
Logo on DRM's Home Page	✓	✓	✓				
Logo on Gala Landing Page	✓	✓	✓	✓	✓	✓	✓
Logo on all Digital Marketing & PR	✓	✓	✓				
Social Media Visibility							
Thank You Post & Tag on FB, Twitter, IG & LinkedIn	✓	✓	✓	✓	✓	✓	
Video on DRM's Social Media	✓						
Video on DRM's Website	✓						
Sponsor Perks							
VIP Reception Invitation	4	2	2				
Surprise Pre-event Gift Delivery for Guests	✓	✓	✓	✓			
Copy of <i>Disability Visibility</i> , Edited by Alice Wong	✓	✓	✓				

Please submit logos and videos to RobinM@DisabilityRightsMD.org - logos as 300ppi PNG files & videos as 16:9 MP4 files by COB 10/15/21. Videos are to be produced by sponsors.

REGISTRATION FORM
Disability Rights Maryland
2021 BREAKING BARRIERS
VIRTUAL AWARDS GALA
Thursday, November 18, 2021, 6:30pm

We are pleased to support the 2021 Breaking Barriers Virtual Gala at the following Level:

- ☐ \$25,000 Legacy ☐ \$15,000 Platinum ☐ \$10,000 Gold
☐ \$7,500 Silver ☐ \$5,000 Bronze ☐ \$2,500 Patron ☐ \$1,000 Partner

Sponsor Name: _____
Please list as you would like sponsor name to appear in event communication and marketing materials.

Payment Options:

☐ Pay with Credit Card

☐ Visa ☐ MC ☐ AMEX ☐ Discover ☐ PayPal

☐ Please add processing fee of \$3.50

Card Number

Name on Card _____
Exp date _____
CSV _____

☐ Pay with Check (enclosed)

*Check payable to Disability Rights Maryland;
Memo: Virtual Gala Sponsorship*

☐ Pay via Stock

*Processing follow-up will be sent to
individual submitting this form*

Name

Billing Address

City State Zip

Cell Phone Home Phone

Email

☐ I am happy to support DRM's mission. \$ _____

Please email RobinM@DisabilityRightsMD.org or call (410) 727-6352 ext. 2482