



SPONSOR-SHIP OPPORTUNITIES

On Saturday, November 17, 2012, Sea-Life Habitat Improvement Project, Inc. (SHIP) will be hosting the 2nd Annual "Sink Our SHIP" party at the Pelican Yacht Club. SHIP, Inc. is a 501.(c)3 public charity

Captain Nemo \$1,500:

- ▶ Recognized with logo and link on www.sinkourship.org website, all signage, SHIP Log Newsletter and slide show at the event.
- ▶ Recognized as a major sponsor in all news releases.
- ▶ Complimentary Deck Club Membership (\$1,000 value).
- ▶ 8 tickets to "Sink Our SHIP" party.

Expedition \$1,000:

- ▶ Recognized with logo and link on our www.sinkourship.org website, all signage, SHIP Log Newsletter and slide show at the event.
- ▶ Complimentary Mid-Ship Membership (\$500 value).
- ▶ 6 tickets to "Sink Our SHIP" party.

Tranquility \$750:

- ▶ Recognized with logo and link on our www.sinkourship.org website, all signage, SHIP Log Newsletter and slide show at the event.
- ▶ Complimentary Crew Club Membership (\$100 value).
- ▶ 4 tickets to "Sink Our SHIP" party.

Compass \$500:

- ▶ Recognized on our www.sinkourship.org website, all signage, SHIP Log Newsletter and slide show at the event.
- ▶ Complimentary Crew Club Membership (\$100 value).
- ▶ 4 tickets to "Sink Our SHIP" party.

Nautilus \$250:

- ▶ Recognized on our www.sinkourship.org website, SHIP Log Newsletter and slide show at the event.
- ▶ Complimentary Admiral's Staff Membership (\$60 value).
- ▶ 2 tickets to "Sink Our SHIP" party.

- ▶ Benefits are for cash donors—the number of dinner tickets will vary for in-kind sponsors.

SEA-LIFE HABITAT IMPROVEMENT PROJECT, INC. IS A 501.C.3 PUBLIC CHARITY DEDICATED TO SINKING A LARGE NAVY TYPE SHIP OFF THE TREASURE COAST AS AN ARTIFICIAL REEF.





Please respond no later than October 19, 2012

TO SPONSOR THIS EVENT, JUST COMPLETE THE INFORMATION BELOW:

_____ Captain Nemo (\$1,500) _____ Expedition (\$1,000)

_____ Tranquility (\$750) _____ Compass (\$500) _____ Nautilus (\$250)

► In kind sponsors are welcomed!

_____ My check is enclosed for: \$ _____ Please bill me for: \$ _____

_____ Master Card / Visa for: \$ _____ Card #: _____

Expiration Date: _____ 3 Digit V Code: _____

Authorized Signature: _____

Credit Card Billing Address: _____

_____ Zip Code: _____

NAME: _____ TITLE: _____

COMPANY NAME: _____

ADDRESS: _____

PHONE: _____ FAX: _____

E-MAIL: _____



Return form and check to:
April Price, Executive Director
PO Box 2541
Fort Pierce, FL 34945-2541
E-mail: shipinc.slc@hotmail.com
(772) 285-1646