

Silly Soirée

SATURDAY, FEBRUARY 29, 2020 | 6:00PM – 8:30PM

THE EVENT

The Silly Soirée is a unique event at Boston Children’s Museum—an event by the kids and for the kids. The formal party allows kids and their grown-ups a unique opportunity for a special date night on the town: dinner, dancing, and a night at the Museum!

THE SILLY SOIRÉE COMMITTEE

Our planning committee of children ages 2–12 helps plan the Soirée to raise funds so that the Museum remains accessible to all families and groups. Our planning committee has fun and has the opportunity to help other kids explore their dreams at Boston Children’s Museum.

JOIN US!

We need your help! Please see below for sponsorship opportunities.



BOSTON CHILDREN’S MUSEUM’S IMPACT

For over 100 years, the Museum has opened the door to discovery through hands-on exhibits designed to educate and engage kids and their grown-ups:

- Over 550,000 visitors each year
- 33% of visitors are able to attend because of free or reduced admission through our Library, \$1 Friday Nights, EBT, Sponsored Visits, Morningstar Special Needs, Teachers, and Military outreach efforts.

SILLY SOIRÉE OVERVIEW

Exposure

An exclusive opportunity to promote your brand to your target demographic—families in the Boston area.

Benefit

Your tax deductible contribution helps young children and their families by nurturing curiosity and building important skills vital for lifelong learning.



SPONSOR PACKAGES

- Sponsor of Giggles – \$10,000
- Sponsor of Chuckles – \$5,000
- Sponsor of Smiles – \$2,500
- Sponsor of High Fives – \$1,000
- Community Sponsor of Fun – \$250–\$500

For more information, visit www.SillySoiree.org
or contact Brenna Richardson at Richardson@BostonChildrensMuseum.org or (617) 986-3728



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\$10,000 SPONSOR OF GIGGLES

1,000 children admitted through Museum access programs

- 30 tickets to the event for your organization
- 10 tickets to the event given in your name to a Boston-area nonprofit or school group
- Opportunity to have an on-site company presence throughout the event
- Name/logo recognition on all event signage and related materials
- Name and/or logo displayed on event website and listed in Annual Report
- Post-event wrap-up report

\$5,000 SPONSOR OF CHUCKLES

500 children admitted through Museum access programs

- 20 tickets to the event for your organization
- Name/logo recognition on all event signage and related materials
- Name and/or logo displayed on event website and listed in Annual Report
- Post-event wrap-up report

\$2,500 SPONSOR OF SMILES

250 children admitted through Museum access programs

- 10 tickets to the event for your organization
- Name and/or logo displayed on event website and listed in Annual Report
- Post-event wrap-up report

\$1,000 SPONSOR OF HIGH FIVES

100 children admitted through Museum access programs

- 4 tickets to the event for your organization
- Name and/or logo displayed on event website and listed in Annual Report
- Name listed in Annual Report

\$250–\$500 COMMUNITY SPONSOR OF FUN

Helps support a Morningstar Access event for families with special needs

- Name and/or logo displayed on event website and event signage
- Name listed in Annual Report



SPONSORSHIP COMMITMENT FORM

Please indicate how you wish to be recognized in promotional materials:

Name/Company: _____ Date: _____

Contact Name (if company is a sponsor): _____

Address: _____ City, State, Zip: _____

Email: _____ Phone: _____

SPONSORSHIP LEVELS

Your sponsorship will allow us to enhance out-of-school-time learning experiences by providing Museum access to different community and school groups.

\$10,000 Sponsor of Giggles

\$1,000 Sponsor of High Fives

\$5,000 Sponsor of Chuckles

\$250–\$500 Community Sponsor of Fun

\$2,500 Sponsor of Smiles

REGRETS

Sadly, I cannot attend, but I would like to support another family by donating \$ _____

PAYMENT METHOD

Please bill me at the address listed above.

Check # _____ enclosed. Please make check payable to Boston Children's Museum.

Please charge my Amex MasterCard Visa Discover

Name on Card: _____ Credit Card #: _____

Signature: _____ Exp. Date: _____ Security Code: _____

For more information, contact Brenna Richardson at Richardson@BostonChildrensMuseum.org or (617) 986-3728.

Please send the completed form to:
Boston Children's Museum, ATTN: Brenna Richardson, 308 Congress Street, Boston, MA 02210

