

# SPONSORSHIP FORM

**125<sup>TH</sup> ANNIVERSARY OF THE ARMENIAN CHURCH OF NORTH AMERICA  
HONORING ST. NERSESS SEMINARY**

SUNDAY, NOVEMBER 17, 2024

_____ <b>BENEFACTOR</b>	\$125,000 - Two tables of 12; Covers the cost of five seminarians for one year; Recognition in memory booklet.
_____ <b>PATRON</b>	\$50,000 - Two tables of 10; Covers the cost of two seminarians for one year; Recognition in memory booklet.
_____ <b>ILLUMINATOR</b>	\$25,000 - One table of 10; Covers the cost of one seminarian for one year; Recognition in memory booklet.
_____ <b>ADVOCATE</b>	\$10,000 - Eight tickets; Recognition in memory booklet.
_____ <b>STEWARD</b>	\$5,000 - Four tickets; Recognition in memory booklet.
_____ <b>GUARDIAN</b>	\$2,500 - Two tickets; Recognition in memory booklet.
_____ <b>SUPPORTER</b>	\$1,250 - One ticket; Recognition in memory booklet.

*Please return by **October 28, 2024** to ensure publication in the booklet*

If your sponsorships are in honor or in memory of someone please indicate below:

**IN HONOR OF** \_\_\_\_\_

**IN MEMORY OF** \_\_\_\_\_

**INDIVIDUAL TICKETS** \$375 per person x \_\_\_\_\_ = \$ \_\_\_\_\_

**I CANNOT ATTEND BUT PLEASE ACCEPT MY DONATION OF:** \$ \_\_\_\_\_

CONTACT INFORMATION

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone (Home/Cell): (\_\_\_\_) \_\_\_\_\_ E-Mail: \_\_\_\_\_

Please make checks payable to "Western Diocese of the Armenian Church"  
with "125th Anniversary" written in the memo section.  
*Proceeds from the event will be allocated to St. Nersess Seminary.*

FOR CREDIT CARD PAYMENT

☐ Check Enclosed   ☐ Visa   ☐ MasterCard   ☐ American Express   ☐ Discover

Cardholder Name: \_\_\_\_\_

Card Number: \_\_\_\_\_

Expiration \_\_\_\_\_ / \_\_\_\_\_ Code \_\_\_\_\_



[www.wdacna.com/125thAnniversary](http://www.wdacna.com/125thAnniversary)

***For questions, please contact the Diocese at 818-558-7474  
or email: [margaretmgr@gmail.com](mailto:margaretmgr@gmail.com)***

**WESTERN DIOCESE OF THE ARMENIAN CHURCH**  
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