

SPONSORSHIP OPPORTUNITIES

- ☐ **DRESS THE HEROES SPONSOR:** Full-page ad, outside back cover & special magazine recognition\$50,000
8.375"w x 10.5"h with 0.125" bleed all sides
- ☐ **"HOLY NAME FOR HER" SPONSOR:** Two-page center spread.....\$35,000
Each page 8.375"w x 10.5"h with 0.125" bleed all sides
- ☐ **COVER SPONSOR:** Inside front cover\$25,000
8.375"w x 10.5"h with 0.125" bleed all sides
- ☐ **PRODUCTION SPONSOR:** Inside back cover.....\$15,000
8.375"w x 10.5"h with 0.125" bleed all sides
- ☐ **MODEL SPONSOR:** Two-page spread (final spread before inside back cover)\$10,000
Each page 8.375"w x 10.5"h with 0.125" bleed all sides
- ☐ **PHOTOGRAPHY SPONSOR:** Final left-hand page (facing inside back cover).....\$7,500
8.375"w x 10.5"h with 0.125" bleed all sides
- ☐ **EDITORIAL SPONSOR:** Full page immediately following fashion spreads\$5,000
8.375"w x 10.5"h with 0.125" bleed all sides
- ☐ **SPOTLIGHT SPONSOR:** Full page\$3,500
8.375"w x 10.5"h with 0.125" bleed all sides
- ☐ **COUTURE SPONSOR:** Half page\$2,000
7.875"w x 4.875"h, no bleed
- ☐ **WOMEN'S WELLNESS SPONSOR:** Quarter page\$1,000
3.8125"w x 4.875"h, no bleed
- ☐ **PREVENTION ADVOCATE:** Logo recognition\$500
- ☐ **SUPPORTER:** Congratulatory listing.....\$250

Ad Deadline: **FRIDAY, SEPTEMBER 18, 2026**

Method of Payment:

- ☐ Enclosed check made payable to **Holy Name Foundation**
- ☐ Credit card
- ☐ I wish to make a donation in the amount of: \$_____

Total: \$_____



Name/Company _____

Billing Address _____

Phone _____

Cell _____

Email _____

☐ Visa ☐ Discover ☐ Mastercard ☐ AMEX Credit Card Number _____

Exp. Date _____

Name on Card (please print) _____

Signature _____

Please return this form to: **Holy Name Foundation, 718 Teaneck Road, Teaneck, NJ 07666.**

Or you may register online at holyname.org/DressTheHeroes. For more information, contact Susie Ramirez at **201-833-7025** or email foundation@holyname.org.