

2014 - 2015 GCPA Advertising & Sponsorship Opportunities

GCPA REPRESENTS THE OLDEST AND LARGEST

LGBT non-profit arts organization in Arizona, and we owe much of our success to our generous donors and sponsors. We are represented by our flagship group, the Phoenix Metropolitan Men's Chorus; our small-group Canyon Echoes; and Omaggio Youth Chorus, 1 of only 6 LGBTQ youth choruses in the nation.



4 Major Event Programs/Publications

Season Opener: Generations, Anthems of Our Age

Holiday Concert: Naughty Nice Sugar & Spice

Canyon Echoes: Boy Bands

Spring Concert: True Colors

Event Program Rates

Ad Size/Position	Single Ad	1/2 Season	Full Season
Back Cover	\$650	\$1125	\$2175
Two Page Inside Spread	\$600	\$1050	\$2000
Inside Front or Back Cover	\$500	\$875	\$1675
Full Page	\$400	\$700	\$1325
1/2 Page	\$250	\$425	\$825
1/4 Page	\$100	\$175	\$325
1/8 Page	\$75	\$125	\$250
Advertising/Name Listing	\$50	\$85	\$175

Ad Specifications

In addition to your printed ad, this season's GCPA advertisers also enjoy the additional benefit of a listing on the **Greater Phoenix Gay & Lesbian Chamber of Commerce (GPGCLCC)** website, providing our advertisers with more visibility in the community!

Call 602-228-5587 or visit grandcanyonperformingarts.org for information

Basic graphic design services available to sponsors and advertisers. Contact Jay Gelnett 602-405-7821 • 1.618design@gmail.com



GCPA Advertising and Sponsorship Form

Business Name: _____ Contact: _____

Telephone #: _____ Cell/Fax #: _____

Address: _____ City/State/Zip: _____

E-mail address: _____ Website/URL: _____

Indicate in which program(s) ad will appear

- Season Opener: Generations, Anthems of Our Age**
- Holiday Concert: Naughty Nice Sugar & Spice**
- Canyon Echoes: Boy Bands**
- Spring Concert: True Colors**

Blush & Bashful Gala February 7, 2015

Level of sponsorship: _____

Table VIP Table

Duet Champagne Table

Individual Tickets (number) _____

Ad size: Full Page 2 Page Spread Half Page Quarter Page 1/8th Page Full Page Front or Back

Method of Payment: Cash Check Credit Card

Please note payment must accompany order.

For Credit Cards: Visa Master Card American Express

Card #: _____ Expiration Date: _____

Name on Card: _____ Amount Charged: _____

Person Authorizing Transaction Signature: _____

Security Code on Back of Card 3 digit EIN #: _____ Billing ZIP Code: _____

Thank you for your order. Please make checks payable to: **GCPA** and mail to P.O. Box 16462 Phoenix, AZ 85011-6462

Name of member who sold ad: _____

