

# 2025 LES BOUTIQUES DE NOEL PATRON FORM

## Please check your desired level of participation:

## ☐ TITLE PATRON \$7,500

- Logo on premier placement signage, lobby and Café de Noel area signage, on all shopping passes, and individual recognition post on Les Boutiques de Noel social media platforms.
- Invitation for 10 to the O. Delton Harrison Patron Gala November 13 at the Home of Harrison & Cissie Smith
- 50 3-day shopping passes; Additional passes available at discounted rate.

## ☐ GRAND PATRON \$5,000

- Logo on premier placement signage, lobby and Café de Noel area signage and individual recognition post on Les Boutiques de Noel social media platforms.
- Invitation for 8 to the O. Delton Harrison Patron Gala November 13 at the Home of Harrison & Cissie Smith
- 25 3-day shopping passes; Additional passes available at discounted rate.

## ☐ PATRON \$2,500

- Logo on lobby and Café de Noel area signage, individual recognition post on *Les Boutiques de Noel* social media platforms.
- Invitation for 6 to the O. Delton Harrison Patron Gala November 13 at the Home of Harrison & Cissie Smith

• 15 3-day shopping passes; Additional passes available at discounted rate.

## □ BENEFACTOR \$1,000

- Name on lobby signage, and inclusion in Benefactor recognition post on *Les Boutiques de Noel* social media platforms.
- Invitation for 4 to the O. Delton Harrison Patron Gala November 13 at the Home of Harrison & Cissie Smith
- 10 3-day shopping passes; Additional passes available at discounted rate.

## □ PRESENTER \$500

- Name on lobby signage and inclusion in Presenter recognition post on Les Boutiques de Noel social media platforms.
- Invitation for 2 to the O. Delton Harrison Patron Gala November 13 at the Home of Harrison & Cissie Smith
- 5 3-day shopping passes; Additional passes available at discounted rate.

#### ☐ GALA PATRON \$150

• Invitation for 1 to the O. Delton Harrison Patron Gala November 13 at the Home of Harrison & Cissie Smith

Please print your name	or the name of yo	our business ex	cactly as you w	ish to be reco	ognized:
Contact Name:					
Phone:	Ema	ail:			
Payment Method:					
	1 .	e Shreveport-I	Bossier Opera	Guild and ma	il, with this form, to:
Shreveport-Bossier Ope					
4830 Line Avenue, Box	: #212				
Shreveport, LA 71106					
Credit Card. Visi	t www.lesboutiqu	esdenoel.com	or fill out Cree	dit Card Auth	orization Form.

Payment must be made by November 1st for inclusion in print materials.

The Shreveport-Bossier Opera guild is a 501c3 organization.

## **Credit Card Authorization Form**

Card Type: ☐ MasterCard ☐ VISA ☐ Discover ☐ AMEX
□Other
Cardholder Name (as shown on card):
Card Number:
Expiration Date (mm/yy):
Cardholder ZIP Code (from credit card billing address):
I,, authorize Shreveport-Bossier Opera Guild to charge my credit card above
for agreed upon Les Boutiques de Noel Patron Participation.
Signature Date