



**CROSSROADS
OF AMERICA COUNCIL**
BOY SCOUTS OF AMERICA®

39th Annual CHARACTER IN ACTION AWARDS DINNER

April 27, 2023 | Biltwell Event Center

2023 Sponsorships

	\$25,000 Sponsorship	\$15,000 Sponsorship	\$10,000 Sponsorship	\$5,000 Sponsorship	\$2,500 Sponsorship
	Presenting Sponsor	Distinguished Eagle Scout	Eagle Scout Table Sponsor	Life Scout Table Sponsor	Star Scout Table
All promotion states "38th Annual Scouting Awards Dinner Presented By: (Your Organization Name)"	✓				
Private pre-event reception with award honorees, major sponsors and Eagle Scouts. Hors d'oeuvres and number of drink tickets:	48	32	16		
Number of tables of 8 seats with premier seating	3	2	1		
Full page ad with prominent placement in program book	✓	✓			
Ad in program book			Full Page	Full Page	Half Page
Number of tables of 8 seats				1	1
Recognition of your organization on sponsorship cards on all tables	✓	✓	✓	✓	✓

Scan for
Event Info



Event info: cacin.us/23-awards

Contact Nathan Young for more information: nyoung@scouting.org | (402) 750-4388



Method of Payment

Bill Cash Credit Card Check

For checks, please make payable to Crossroads of America Council, Boy Scouts of America.

Name on Card: _____

Card Number: _____

Expiration Date: _____ Billing ZIP: _____



Signature: x _____

Contributions to Crossroads of America Council are tax deductible to the full extent of the law and benefit the Council, staying here in central Indiana, as Crossroads of America Council, Boy Scouts of America is a 501(c)(3) nonprofit organization. Some sponsorships may have portions that are not tax deductible as the cost of consumable materials factors into the sponsorship contribution. Donations made using this pledge card apply to the 2022 Special Events campaign and are payable by 12/31/2022. Contributions can be sent to the Crossroads of America Council 7125 Fall Creek Road N, Indianapolis, IN 46256.

Sponsorship Information

Contact Name: _____

Organization Name: _____

Sponsorship Amount: _____

Preferred Invoice Schedule: (Please indicate one)

Annually: _____ (specify month: _____)

Quarterly: _____ (Jan/Apr/Jul/Oct)

Monthly: _____ (through Nov)

Signature: x _____

Office Use Only

Donor ID #: _____