



ALDEA

# Hats Off Gala

## SPONSORSHIP COMMITMENT FORM

COMPANY OR INDIVIDUAL: \_\_\_\_\_

CONTACT NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE/ZIP: \_\_\_\_\_

TELEPHONE: \_\_\_\_\_

EMAIL: \_\_\_\_\_

Yes, we would like to support Aldea at the Hats Off Gala on May 9, 2026 at Sunrise Ranch Winery with the following Sponsorship

\_\_\_ TRIPLE CROWN SPONSOR – \$10,000

\_\_\_ WINNER’S CIRCLE SPONSOR – \$5,000

\_\_\_ STARTING GATE SPONSOR- \$3,000

By signing this sponsorship commitment form, I agree to remit payment on or before April 30, 2026

Signature: \_\_\_\_\_

Please return this form as soon as possible to:  
[Development@aldeainc.org](mailto:Development@aldeainc.org)

For more information about sponsorship opportunities, please contact Chris:  
[cvalenzuela@aldeainc.org](mailto:cvalenzuela@aldeainc.org)

Make checks payable to:  
**Aldea, Inc**  
Mailing Address:  
P.O. Box 841  
Napa, CA 94559

\*Please let us know if you would prefer to pay by card and we will send you a link.

## THANK YOU FOR YOUR CONTINUED SUPPORT OF ALDEA

