

**SOUTH AFRICAN
Ballet
THEATRE**

Quality

Glamour

Escapism

Magic



Times are tough and we really need your help!!!

You personally have the power to ensure the magic of ballet continues!

Please assist us in any area you can.

The South African Ballet Theatre would greatly value your ongoing support, whether financial or in kind, in any of the following areas:

No	SABT Sponsorship Opportunity	Cost
1	Sponsorship & naming rights to one of SABT's 4 main seasons	R 2 000 000
2	Sponsorship of one of SABT's six Outreach Programmes	R 200 000
3	An entire performance of a season exclusively for your guests/clients	R 130 000
4	Sponsoring the buy-out of a performance for charities to attend free of charge	R 100 000
5	Sponsorship of pointe shoe costs	R 500 & upwards
6	Join Hall of 1000 Stars	R 50 & upwards per month
7	Donation of any amount towards any aspect of SABT	R 10 & upwards!
	Other Opportunities	Contact
8	Sponsorship of transport costs – Outreach children transportation, SABT sets & costumes for seasons	Zai Miller (SABT Fundraiser) on 011 877 6882
9	Volunteer your/your business's time/ resources: e.g. office supplies, consulting services, etc	Zai Miller
10	Leave a lasting legacy to SABT through a bequest to the SABT Trust	James Campbell (Chairman: SABTT) on 083 457 3724

Contact Details

Title: _____

Name: _____

Postal Address: _____

Telephone / Mobile Number

Fax: _____

Email: _____

Company(if applicable): _____

Sponsorship area of interest (list number from alongside this column:) _____

SABT representatives will be available in the theatre foyer at the information tables during interval and after the performance to assist you with any queries or further information.

SABT Banking Details:

Account: The South African Ballet Theatre

Bank: FNB (cheque account)

Branch: Parktown (250 455)

Account: 620 338 26788

Thank you for your support!

Please fill in your details should you wish to make a donation/sponsorship via Credit Card or Monthly Debit Order

Sponsorship Option No.: _____

Amount: _____

Once Off payment Monthly

Credit Card Details:

Name on card: _____

Credit card no: _____

Expiry date: ____/____

CVV No: (last 3 digits on back of card) _____

Debit Order Details:

Account name: _____

Account No: _____

Bank: _____ Code: _____

Account type: _____

Debit Order Amount per month: _____



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Website: www.saballettheatre.co.za

Association Incorporated Under S21:
2001/016254/08
016-403 NPO

Section 18A Certificate (Outreaches)

Proudly Resident at

the JOBURG the mandela at
africa's premier home of live entertainment **THEATRE**
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