



## 20<sup>th</sup> Annual Journey of Dreams Underwriting Opportunities

Dear Community Friend,

Parent to Parent of Miami's nonprofit parent center is dedicated to empowering families of children with disabilities. This year, we are thrilled to celebrate the 20th anniversary of our annual gala, ***Journey of Dreams***, and we invite you to join us in making this milestone event more impactful than ever.

For more than 36 years, Parent to Parent of Miami has been a beacon of hope for countless families, offering them the resources, guidance, and peer support they need to thrive. Our gala celebrates the amazing work of community leaders while also raising critical funds to expand our programs.

**We would like to extend the opportunity for you to support our organization by underwriting a portion of the event.** By selecting one of our underwriting opportunities, you help our parent center continue to empower more than 1,500 families in Miami-Dade County each year as we all strive to improve the lives of children with disabilities. **YOU** will be directly helping children with disabilities succeed!

Your support would send a powerful message of solidarity and hope to families facing the everyday realities of disability. Together, we can ensure our *Journey of Dreams* can help pave the way for a future where every child's potential can be fully realized. Feel free to contact Fari García at extension 224 or through email at [fgarcia@ptopmiami.org](mailto:fgarcia@ptopmiami.org) or Idamar Siverio at extension 226 or via email at [isiverio@ptopmiami.org](mailto:isiverio@ptopmiami.org). For more details and for online payment options visit [bit.ly/journeyofdreams2024](http://bit.ly/journeyofdreams2024).

Thank you for considering supporting Parent to Parent of Miami. Your support could truly make a difference in the lives of many families and children. We look forward to the possibility of collaborating with you for *Journey of Dreams*!

With warmest regards,

Farides García  
President/CEO

Maday Bonet  
Board of Trustees Chair

Idamar Siverio  
Development Coordinator

PARENT TO PARENT OF MIAMI MEETS ALL REQUIREMENTS SPECIFIED BY THE FLORIDA SOLICITATION OF CONTRIBUTIONS ACT. A COPY OF THE OFFICIAL REGISTRATION AND FINANCIAL INFORMATION MAY BE OBTAINED FROM THE DIVISION OF CONSUMER SERVICES BY CALLING TOLL FREE WITHIN THE STATE (1-800-435-7352). REGISTRATION DOES NOT IMPLY ENDORSEMENT, APPROVAL OR RECOMMENDATION BY THE STATE. CH14810.



20<sup>TH</sup> JOURNEY OF DREAMS 2024  
UNDERWRITING OPPORTUNITIES

Each year, generous businesses, organizations and individuals underwrite elements of Journey of Dreams, allowing Parent to Parent of Miami to dedicate event revenue to community programs in support of children with disabilities and their families. Please consider the following opportunities:

- AUDIO VISUAL** .....\$6,000  
Includes logo in evening program, signage, and website plus two tickets
- WINE FOR COCKTAIL RECEPTION AND DINNER (300 Guests)** .....\$3,000  
Includes logo on evening program, signage, and website plus two tickets
- ENCOURAGE THE HEART TABLE**.....\$3,000  
Includes logo in evening program and seating for 10 families plus two tickets
- FLOWERS AND DECORATIONS**.....\$2,500  
Includes logo on evening program, signage, and website plus two tickets
- EVENING PROGRAM** .....\$2,000  
Includes advertising opportunity on program book outside back cover
- ENTERTAINMENT** .....\$2,000  
Includes name recognition and quarter-page ad
- PHOTOGRAPHY** .....\$1,000  
Includes quarter-page ad

To confirm your 2024 Journey of Dreams Underwriting sponsorship, please fax this form to 305.271.6628 or mail with a check payable to Parent to Parent of Miami, 7990 SW 117 Avenue, Ste 200, Miami, FL 33183.

**YES, I am committed to underwriting the following item(s):**

- Audio Visual (\$6,000)    Wine (\$3,000)    Flowers and Décor (\$2,500)    Evening Program (\$2,000)    Entertainment (\$2,000)    Encourage the Heart table (\$3,000)    Photography (\$1,000)

**Visit our online event page for information and online payment options at**

<https://bit.ly/journeyofdreams2024>

**CONTACT:**

Company: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

Contact Person: \_\_\_\_\_

Tel: \_\_\_\_\_

Email: \_\_\_\_\_

**PAYMENT:**

<input type="checkbox"/> CHECK	<input type="checkbox"/> BILL ME
<input type="checkbox"/> Credit card:	
<input type="checkbox"/> AmEx	<input type="checkbox"/> Visa <input type="checkbox"/> MasterCard
Number: _____	
Expiration: _____	Sec. Code: _____
Cardholder: _____	
Signature: _____	

Yes, we will cover the 3% credit card processing fee.

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