



origiNation Cultural Arts Center

Dear Friends:

On Saturday October 4, 2008, **OrigiNation Cultural Arts Center** (www.originationinc.org) will present ***Twist and Shout***, our annual benefit performance of dance and spoken word to support our programs. I am writing to invite you to join our efforts to involve youth in meaningful arts programs by becoming a sponsor of this event. The one-night only performance will take place at the **Roxbury Community College Main Stage Theater**. The evening will begin with a VIP Reception at 6:30 p.m. followed by an 8:00 p.m. performance.

OrigiNation is a 501(c)(3) non-profit performance arts program that provides training in modern dance, ballet, jazz, hip-hop and Tae Kwon Do to youth between the ages of 5 and 18. While our programs are open to all youth, the majority of our students live in Boston's underserved neighborhoods of Roxbury, Dorchester and Mattapan, where access to quality dance and theater programs are limited as compared to the need. We serve over 500 boys and girls annually through our **Performance Arts Program, Professional Dance Division, 4-week Summer Arts Program, and Summer Dance Intensive**. We also operate a **Community Outreach & Education Program**, through which we provide lecture demonstrations, special workshops and performances to an additional 4,500 youth throughout the U.S. annually. In 2008 we launched our **Youth Empowerment through the Arts Tour**. As part of this exciting program, 10 members of our Professional Dance Division traveled to the **South African** cities of **Johannesburg, Pretoria, and Soweto** where they performed for and taught dance classes to elementary and high school students over the course of 10 days. They also delivered clothing and school supplies to students in need. Plans are currently underway for our 2008-2009 tour which will take place in **Dakar Senegal**.

This year's benefit will feature young people from our four professional dance companies in the world premieres of two contemporary modern works: **Script the Flip** set to music by **Nina Simone** and **Heartbreak** set to the music of **Lettonia Philharmonic Orchestra & Riga Radio Chorus** performing **'Carmina Burana'**. The program for will also include audience favorites such as **Block Party**, and **Ignition**.

Our goal is to raise \$50,000 to support our existing programs and further our mission of providing innovative and culturally significant arts programming and leadership development to the youth we serve. I hope that you will join our efforts to challenge, motivate and inspire young people by becoming a sponsoring of this event.

Below you will find various forms, which detail the various sponsorship and acknowledgement opportunities available for this year's gala performance. Please feel free to contact me at (617) 541-1875 if I can provide you with any additional information about our work or this event.

Thank you so much for your consideration. I look forward to hearing from you.

Sincerely,

Shaumba Yandje Dibinga

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Founding Artsitic Director



OrigiNation Cultural Arts Center

presents

Twist & Shout! An Evening of Dance, Music & Spoken Word

Saturday October 4, 2008

Roxbury Community College Mainstage Theater

VIP Reception: 6:30 pm | Performance: 8:00 pm

SPONSORSHIP FORM

Contact: _____

Company: _____
(As it should appear in program)

Street Address: _____

City/State/Zip: _____

Phone/Fax: _____

Enclosed please find my check for: \$

- Presenting Sponsor** **\$5,000** 10 tickets to the performance and VIP reception; a full-page ad in the benefit journal (inside front cover); listing on poster and print materials; inclusion in gift bag; and 10 gift bags.
- Gold Sponsor** **\$1,000** 10 tickets to the performance and VIP reception; a full-page ad in the benefit journal; and 10 gift bags.
- Silver Sponsor** **\$500** 6 tickets to the performance and VIP reception; a half-page ad in the benefit journal; and 6 gift bags.
- Bronze Sponsor** **\$250** 4 tickets to the performance and VIP reception; a quarter-page ad in the benefit journal; and 4 gift bags.
- Friends** **\$150** 2 tickets to the performance and VIP reception; a listing in the benefit journal; and 2 gift bags.

Please send this form along with your check or money order payable to:

“OrigiNation, Inc.”
P.O. Box 191878 | Roxbury, MA 02119
For more information contact:
Muadi B. Dibinga: (617) 541-1875 or (917) 604-6030

OrigiNation, Inc. is a 501(c)(3), nonprofit organization. The estimated value for the evening is \$40 per person. The balance of the ticket price is tax-deductible. All contributions are tax-deductible to the extent allowed by law.



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AD REPLY FORM

Ad Specifications

- Ad Design
 - We are/I am designing my own ad. We/I have enclosed:
 - ___ A Disk/CD with hard copy for reference
 - ___ Camera-ready artwork with hard copy for reference
 - ___ Disk/CD or camera-ready artwork will be sent separately
- **All artwork must be submitted as a jpeg or word file.**

Ad Sizes and Rates (please circle choice)

Full Page 7¾" w x 10¼" h	Rate \$300	Full page 7¾" x 10¼"	Half Page 7¾" x 5"
Half Page 7¾" w x 5" h	\$200		Quarter Page 3 5/8" x 4 7/8"
Quarter Page 3 5/8" w x 4 7/8" h	\$100		

Contact Information

Name _____
 Organization (If applicable) _____
 Address City, State, Zip _____
 Telephone (daytime) _____ Email _____ Fax _____

Note: If person creating the camera-ready art and/or disk is different from the person listed above, please provide: Name _____ Telephone _____ Email _____

Payment Information: Enclosed is my check or money order payable to "OrigiNation, Inc." for \$ _____

All ads and payments must be submitted by: Friday September 26, 2008

By mail: Send this form and your artwork to: OrigiNation, Inc. • P.O. Box 191878 • Roxbury, MA 02119

By fax: Fax this form with credit card information to: (617) 541-1876. Send art work via email: mdibinga@bijimbaconsulting.com

For more information please call Muadi at: (617) 541-1875/(917) 604-6030



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PRODUCT DONATION FORM

Contact: _____

Company: _____

(As it should appear in program)

Street Address: _____

City/State/Zip: _____

Phone/Fax: _____

Description of Item (Please be specific. Include all restrictions, black-out dates, expiration dates, and other limitations on the use and availability of the item). Attach separate sheet if necessary.

Donor's Valuation of Item (for IRS purposes): \$ _____

SERVICE OR GIFT CERTIFICATE INFORMATION REQUIREMENTS

If you are donating a gift certificate for a service, please provide a letter or certificate including the following information:

- Name of product or service
- Description of what is included and what is excluded
- Name of person to contact for further information
- Instructions on how to redeem item
- Include any additional information such as a photo or descriptive brochure as appropriate
- Date of expiration

The deadline for inclusion in the program journal is Friday September 26, 2008, 5:00p.m.

Please send this form along with your check or money order payable to:

"OrigiNation, Inc." - P.O. Box 191878 - Roxbury, MA 02119

For more information contact:

Muadi B. Dibinga: (617) 541-1875/ (917) 604-6030 or send an email to: mdibinga@bijimbaconsulting.com