# 2024 College Classic 

## Hosted by <br> The Astros Foundation

March 1-3, 2024 | Minute Maid Park

## SUITE PACKAGE

$\square$ \$5,000 - Single
One (1) 25-person suite for 1 day of the College Classic, F\&B not included
$\square$ \$7,500 - Double
One (1) 25-person suite for all 3 days of the College Classic, F\&B not included

## SUITE + SPONSORSHIPS <br> \$10,000 - Triple

One (1) 25-person suite each day of the College Classic, F\&B not included | LED Advertisement | One (1) Static Field Rail Banner along lst OR 3rd baseline in foul territory for all 9 games of the College Classic (All 9 games will be broadcast live on the Space City Home Network)

## \$15,000 - Homerun

One (l) 25-person suite each day of the College Classic, F\&B not included Company Television Ad to run during the broadcast on Space City Home Network | El Grande Advertisement | LED Advertisement | One (l) Static Field Rail Banner along lst OR 3rd baseline in foul territory for all 9 games of the College Classic (All 9 games will be broadcast live on the Space City Home Network) | 50 General Admission Tickets

## \$25,000 - Grand SCam

Table for 10 Tickets to the 2024 Kickoff Hall of Fame Wine Dinner | One (1) 25-person suite each day of the College Classic, F\&B not included | Company Television Ad to run during the broadcast on Space City Home Network | El Grande Advertisement | LED Advertisement | One (1) Static Field Rail Banner along lst OR 3rd baseline in foul territory for all 9 games of the College Classic (All 9 games will be broadcast live on the Space City Home Network) | 100 General Admission Tickets

| Name: $\qquad$ <br> (As you would like it to appear in all printed materials) |  |  |
| :---: | :---: | :---: |
| Company: |  |  |
| Contact Name: |  | Phone: |
| Address: |  |  |
| City: | State: | Zip: |
| E mail: |  |  |
| Check enclosed (Payable to Astros Foundation) | $\square$ Please invoice me | $\square$ Credit Card: $\square$ Visa $\square$ MC $\square$ AMEX $\square$ Discover |
| Name on card: |  | Card number: |
| Exp. Date: | CVV: | Billing Zip Code: |

