



# 36th Annual York Distinguished Citizen Celebration

**May 16, 2024**

**12:00 p.m.**  
**Yorkview Hall**  
**Willman Business Center**  
**York College**  
**44 Country Club Road**  
**York, Pennsylvania**



*Honoring*  
**Michael Kochenour**  
Founder & Chairman  
Traditions Bank

*Presenting Sponsor*



**TRADITIONS BANK**  
Make Your Mark

*Benefitting*



**BOY SCOUTS OF AMERICA**  
*New Birth of Freedom Council*

*Register Online*



## *Sponsorship Levels*

### **Eagle Sponsor - \$5,000**

*Includes one table with premier seating for eight guests, special recognition, full-page program ad.*

### **First-Class Sponsor - \$1,000**

*Includes seating for four guests OR a full-page program ad.*

### **Life Sponsor - \$2,500**

*Includes one table for eight guests, special recognition, half-page program ad.*

### **Tenderfoot Sponsor - \$500**

*Includes seating for two guests OR half-page program ad.*

### **Star Sponsor - \$1,500**

*Includes one tables for eight guests, quarter-page program ad.*

### **Scout Sponsor - \$250**

*Includes seating for one guest OR quarter-page program ad.*

*Submit questions, guest names and program ads to Cameron Holman at [cameron.holman@scouting.org](mailto:cameron.holman@scouting.org), Phone: 717-620-4530. Full-page ads are 8.5" wide x 11" tall. Half page ads are 8.5" wide x 5.5" tall. Quarter-page ads are 4.25" wide x 5.5" tall. Send program ads in black & white or grayscale and JPEG or PDF formats.*

Please RSVP and submit program ads by **Wednesday, May 1**. Please make checks payable to: New Birth of Freedom Council. Return to: York DCC, New Birth of Freedom Council, BSA, 1 Baden Powell Lane, Mechanicsburg, PA 17050

Sponsorship level:  Eagle  Life  Star  First-Class  Scout with guests  Scout with half-page program ad

Please reserve \_\_\_\_\_ seat(s) at \$250 per guest. I cannot attend but would like to make a contribution of \$\_\_\_\_\_

Contact Name: \_\_\_\_\_ Company: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

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

Payment:  Check enclosed.  Please send an invoice.  Please charge my credit card below.

Amount: \$ \_\_\_\_\_ Type:  Visa  MasterCard  Discover  AMEX Exp. Date: \_\_\_\_\_

Account #: \_\_\_\_\_ Signature: \_\_\_\_\_