



SPONSORSHIP OPPORTUNITIES – 2023

We invite your participation as a sponsor of the **Chairman’s Reception, A Toast to Excellence**. All sponsorships include company logo on Capital Health website and sponsor media at the event.

CHAIRMAN’S RECEPTION, A TOAST TO EXCELLENCE

THURSDAY, NOVEMBER 16, 2023 | THE STONE TERRACE | 2275 KUSER ROAD, HAMILTON, NJ 08690

EVENT SPONSORSHIP

<input type="checkbox"/> PRESENTING EXCLUSIVE	\$35,000	12 TICKETS reserved seating	<input type="checkbox"/> GOLD	\$10,000	6 TICKETS reserved seating
<input type="checkbox"/> PLATINUM	\$25,000	10 TICKETS reserved seating	<input type="checkbox"/> SILVER	\$5,000	4 TICKETS
<input type="checkbox"/> DIAMOND	\$15,000	8 TICKETS reserved seating	<input type="checkbox"/> BRONZE	\$2,500	2 TICKETS

COMMEMORATE THE HONOREE

<input type="checkbox"/> PATRON	\$1,000	1 TICKET	<input type="checkbox"/> FRIEND	\$500
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GIFT OF SUPPORT

We are unable to attend the Chairman’s Reception, but would like to provide a gift of support and have enclosed a contribution of:

- \$5,000
 \$4,500
 \$4,000
 \$3,500
 \$3,000
 \$2,500
 OTHER \$ _____

DONOR INFORMATION

COMPANY NAME CONTACT NAME & TITLE

ADDRESS CITY STATE ZIP

PHONE EMAIL

PAYMENT INFORMATION

PLEASE FULFILL YOUR SPONSORSHIP COMMITMENT BY DECEMBER 31, 2023.

Payment Total:

- Enclosed is our payment of \$ _____
 Full payment of \$ _____ will be forthcoming.
(IF APPLICABLE)

Payment will be made via:

- CHECK, payable to Capital Health
 CREDIT CARD

ONLINE REGISTRATION

Visit www.capitalhealth.org/donate/make-gift-new and make an online donation.

Name (as it appears on card — please print)

Card Number Exp. Date

CW Billing Zip

Payment schedule will be:

- ONE-TIME, occurring by _____ DATE
 REMAINING TWO QUARTERS OF CALENDAR YEAR
DELIVER BY SEPTEMBER & DECEMBER 2023

Please complete & return this form to: Capital Health Foundation • Two Capital Way, Suite 361 • Pennington, NJ 08534
For more information, please contact Ginger Zhou, Special Events & Projects Coordinator, at (609) 303-4349 or gzhou@capitalhealth.org.

INVITATIONS TO ATTEND THE GOLF TOURNAMENT AND/OR CHAIRMAN’S RECEPTION MAY NOT BE MADE DIRECTLY TO CAPITAL HEALTH EMPLOYEES. PLEASE CONTACT CAPITAL HEALTH FOUNDATION IF YOU WISH TO INVITE AN EMPLOYEE TO ATTEND AS YOUR GUEST. IF YOU WISH TO BE REMOVED FROM OUR MAILING LIST FOR INVITATIONS AND OTHER RELATED FUNDRAISING ACTIVITIES, PLEASE EMAIL YOUR REQUEST TO donate@capitalhealth.org OR CALL (609) 303-4121.