



# SPONSORSHIP OPPORTUNITIES – 2024

We invite your participation as a sponsor of the **Dr. Abraham George Memorial Golf Tournament & Chairman's Reception**. All sponsorships include company logo on Capital Health website and sponsor media at the event.

## DR. ABRAHAM GEORGE MEMORIAL GOLF TOURNAMENT

MONDAY, JULY 15, 2024 | FORSGATE COUNTRY CLUB | 375 FORSGATE DRIVE, MONROE TOWNSHIP, NJ

PLEASE <input checked="" type="checkbox"/> SELECTION BELOW:		GOLF FOR	RECEPTION FOR	COURSE TEE SIGN (2)	PIN HOLE FLAG	TIX BUNDLE FOR	COMPANY LOGO DISPLAYED ON
<input type="checkbox"/> <b>PRESENTING SPONSOR</b> EXCLUSIVE	\$25,000	8	+10 guests reserved seating	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	8	<ul style="list-style-type: none"> <li>Welcome sign at Golf Tournament, Croquet/Bocce Court, and Tournament Reception</li> <li>Exclusive logo item for all tournament participants</li> </ul>
<input type="checkbox"/> <b>CHAMPION SPONSOR</b> EXCLUSIVE	\$15,000	8	+8 guests reserved seating	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	8	<ul style="list-style-type: none"> <li>Welcome sign at Tournament Reception</li> <li>Exclusive logo item for all tournament participants</li> </ul>
<input type="checkbox"/> <b>GRAND PRIX SPONSOR</b> EXCLUSIVE	<b>THANK YOU MARQUIS HEALTH CONSULTING SERVICES, LAWRENCE REHABILITATION HOSPITAL, AVALON REHABILITATION AND HEALTHCARE CENTER</b>						
<input type="checkbox"/> <b>PICKLEBALL SPONSOR</b> EXCLUSIVE	\$10,000	8 pickleball	+4 guests reserved seating	<input checked="" type="checkbox"/>	—	—	<ul style="list-style-type: none"> <li>Welcome sign at Pickleball Court</li> <li>Exclusive logo item for all tournament participants</li> </ul>
<input type="checkbox"/> <b>GOLF CART SPONSOR</b> EXCLUSIVE	<b>THANK YOU CURE AUTO INSURANCE</b>						
<input type="checkbox"/> <b>NINE IRON SPONSOR</b>	\$10,000	8	+4 guests reserved seating	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	—	<ul style="list-style-type: none"> <li>All Bottled Water</li> </ul>
<input type="checkbox"/> <b>EAGLE SPONSOR</b>	\$7,500	4	+4 guests	<input checked="" type="checkbox"/>	—	—	<ul style="list-style-type: none"> <li>Signage at Driving Range</li> </ul>
<input type="checkbox"/> <b>BEVERAGE SPONSOR</b>	\$7,500	4	+2 guests	—	—	—	<ul style="list-style-type: none"> <li>Signage at Beverage Stations &amp; Bar (includes Bloody Mary/Mimosa/Bellini Specialty Bar)</li> </ul>
<input type="checkbox"/> <b>FORE SPONSOR</b>	\$5,000	4	+2 guests	<input checked="" type="checkbox"/>	—	—	—
<input type="checkbox"/> <b>TOURNAMENT RECEPTION</b>	\$5,000	4	+2 guests	—	—	—	<ul style="list-style-type: none"> <li>Signage at Tournament Reception</li> </ul>
<input type="checkbox"/> <b>REGISTRATION SPONSOR</b>	\$5,000	4	+2 guests	—	—	—	<ul style="list-style-type: none"> <li>Signage at Registrations</li> </ul>
<input type="checkbox"/> <b>AWARDS SPONSOR</b>	\$5,000	4	+2 guests	—	—	—	<ul style="list-style-type: none"> <li>Signage on Awards Table</li> </ul>
<input type="checkbox"/> <b>BIRDIE SPONSOR</b>	\$3,500	4	—	<input checked="" type="checkbox"/>	—	—	—

### ADDITIONAL SPONSORSHIPS

	INCLUDES:
<input type="checkbox"/> <b>GOLF BALL LAUNCHER SPONSOR</b> EXCLUSIVE	<b>THANK YOU RENNERBROWN, INC.</b>
<input type="checkbox"/> <b>MULLIGAN TICKET SPONSOR</b> EXCLUSIVE	\$2,500 • Company logo displayed on mulligan tickets
<input type="checkbox"/> <b>GOLF RANGE DIVIDERS SPONSOR</b> EXCLUSIVE	<b>THANK YOU FROMKIN BROTHERS, INC.</b>
<input type="checkbox"/> <b>PUTTING GREEN SPONSOR</b> EXCLUSIVE	<b>THANK YOU EMPOWER</b>
<input type="checkbox"/> <b>CORN HOLE SIGN SPONSOR</b>	\$500 • Company logo displayed at corn hole games

\*Golf includes greens fees, lunch, cart, on-course snacks and beverages, Tournament Reception and player gift.

\*\*\*TIX BUNDLE includes Mulligan, Raffle and 50/50.

\*\*Croquet/Bocce & Pickleball includes lunch, on-course snacks and beverages, Tournament Reception and player gift.

### ADDITIONAL OFFERINGS

GOLF SIGNAGE OPPORTUNITIES	
<input type="checkbox"/> <b>DRIVING RANGE SIGN</b>	\$1,500
<input type="checkbox"/> <b>CONTEST SIGN (PLEASE <input checked="" type="checkbox"/> ONE):</b> <input type="radio"/> Ring of Gold <input type="radio"/> Closest to the Pin <input type="radio"/> Longest Drive <input type="radio"/> Hole-In-One	\$1,400
<input type="checkbox"/> <b>COMMEMORATIVE PIN HOLE FLAG</b>	\$1,000
<input type="checkbox"/> <b>BANKS &amp; PALMER TEE SIGNS</b>	\$1,400
<input type="checkbox"/> <b>TEE SIGN</b>	\$750

PARTICIPATION OPPORTUNITIES	
<input type="checkbox"/> <b>GOLF — FOURSOME</b>	#___ @ \$2,000
<input type="checkbox"/> <b>GOLF — INDIVIDUAL</b>	#___ @ \$525
<input type="checkbox"/> <b>CROQUET/BOCCE PLAYER — INDIVIDUAL</b>	#___ @ \$300
<input type="checkbox"/> <b>PICKLEBALL PLAYER — INDIVIDUAL</b>	#___ @ \$300
<input type="checkbox"/> <b>TOURNAMENT RECEPTION — INDIVIDUAL</b>	#___ @ \$200

### GIFT OF SUPPORT

We are unable to attend the Golf Tournament, but would like to provide a gift of support and have enclosed a contribution of:

- \$3,000  
  \$2,500  
  \$2,000  
  \$1,500  
  \$1,000  
  \$500  
  OTHER \$\_\_\_\_\_



# SPONSORSHIP OPPORTUNITIES – 2024

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 21, 2024 | THE STONE TERRACE | 2275 KUSER ROAD, HAMILTON, NJ 08690

### EVENT SPONSORSHIP

<input type="checkbox"/> <b>PRESENTING EXCLUSIVE</b>	<b>\$35,000</b>	<b>12 TICKETS</b> invitation to Benefactor & Awardees Pre-Event Reception and reserved seating at Chairman’s Reception.	<input type="checkbox"/> <b>GOLD</b>	<b>\$10,000</b>	<b>6 TICKETS</b> reserved seating at Chairman’s Reception.
<input type="checkbox"/> <b>PLATINUM</b>	<b>\$25,000</b>	<b>10 TICKETS</b> invitation to Benefactor & Awardees Pre-Event Reception and reserved seating at Chairman’s Reception.	<input type="checkbox"/> <b>SILVER</b>	<b>\$5,000</b>	<b>4 TICKETS</b>
<input type="checkbox"/> <b>DIAMOND</b>	<b>\$15,000</b>	<b>8 TICKETS</b> invitation to Benefactor & Awardees Pre-Event Reception and reserved seating at Chairman’s Reception.	<input type="checkbox"/> <b>BRONZE</b>	<b>\$2,500</b>	<b>2 TICKETS</b>
<b>COMMEMORATE THE AWARDEE</b>					
<input type="checkbox"/> <b>PATRON</b>	<b>\$1,000</b>	<b>1 TICKET</b>	<input type="checkbox"/> <b>FRIEND</b>	<b>\$500</b>	

### 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:

\$2,000    \$1,500    \$1,000    \$750    \$500    \$250    OTHER \$ \_\_\_\_\_

### DONOR INFORMATION

COMPANY NAME \_\_\_\_\_ CONTACT NAME & TITLE \_\_\_\_\_

ADDRESS \_\_\_\_\_ CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

PHONE \_\_\_\_\_ EMAIL \_\_\_\_\_

### PAYMENT INFORMATION

PLEASE FULFILL YOUR SPONSORSHIP COMMITMENT BY DECEMBER 31, 2024.

#### 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](http://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 QUARTERS OF CALENDAR YEAR  
DELIVER BY MARCH, JUNE, SEPTEMBER & DECEMBER 2024

**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](mailto: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](mailto:donate@capitalhealth.org) OR CALL (609) 303-4121.