



capitahealth
Foundation

SPONSORSHIP OPPORTUNITIES – 2026

We invite your participation to sponsor the *Chairman's Reception, A Toast to Excellence*. All sponsorships include company logo on Capital Health Foundation website and event day media.

CHAIRMAN'S RECEPTION, A TOAST TO EXCELLENCE

Thursday, December 3, 2026 · The Stone Terrace · Hamilton, NJ

PLEASE ✓ SELECTION BELOW:

EVENT SPONSORSHIP

PRESENTING EXCLUSIVE	\$25,000	THANK YOU PF CONCEPTS
☐ PLATINUM	\$15,000	10 tickets Reserved seating at Chairman's Reception + Logo
☐ DIAMOND	\$10,000	8 tickets Reserved seating at Chairman's Reception + Logo
☐ GOLD	\$7,500	6 tickets Shared table sponsor with reserved seating at Chairman's Reception + Logo
☐ SILVER	\$5,000	4 tickets Logo
☐ BRONZE	\$2,500	2 tickets Logo

COMMEMORATE THE AWARDEE

☐ PATRON	\$1,000	1 ticket
☐ FRIEND	\$500	—

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 ☐ \$1,000 ☐ \$500
☐ \$1,500 ☐ \$750 ☐ \$250
☐ OTHER \$ _____

DONOR INFORMATION

COMPANY NAME	CONTACT NAME AND TITLE
ADDRESS	CITY STATE ZIP CODE
PHONE	EMAIL

PAYMENT INFORMATION

Please fulfill your sponsorship commitment by December 31, 2026.

- ☐ Enclosed is our payment of \$ _____
☐ Full payment of \$ _____ will be forthcoming

Payment schedule will be:

- ☐ One time, occurring by _____ (date)
☐ Remaining quarters of calendar year
Deliver by March, June, September, and December 2026

Please complete and return this form to:

Capital Health Foundation
Two Capital Way, Suite 361 · Pennington, NJ 08534

For more information, please contact Heather Kearns-Latini,
at 609.303.4346 or hkearnslatini@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 fundraising-related activities, please email your request to foundation@capitalhealth.org or call 609.303.4121.

PAYMENT WILL BE MADE VIA:

- ☐ CHECK, payable to Capital Health
- ☐ ONLINE REGISTRATION
Chairman's Reception: please visit:
Chairman's Reception, A Toast to Excellence

CREDIT CARD

NAME (as it appears on card, please print)

CARD NUMBER

CVV

EXP. DATE

BILLING ZIP CODE