

35th ANNUAL NJHA EXECUTIVE/TRUSTEE GOLF TOURNAMENT

Monday, July 25, 2016 – The Ridge at Back Brook

SPONSORSHIP OPPORTUNITIES

□ Platinum Sponsor \$10,000

Exclusive Opportunity

ncludes four golfers to participate in the day's events, plus two additional reception guests, signage at registration, brunch and dinner, presentation of plaque at dinner, full page program ad and special signage on the first tee and green.

□ Gold Sponsor \$7,500

ncludes two golfers to participate in the day's events, plus two additional reception guests, full page program ad, tee signage and additional signage appropriate to sponsorship selection.

Available sponsorships *(please select one):* \Box Golf Carts \Box Beverage Carts \Box Gift Sponsor

□ Silver Sponsor \$5,000

ncludes two golfers to participate in the day's events, full page program ad, tee signage and signage appropriate to sponsorship selection.
Available sponsorships *(please select one):*
Brunch
Cocktails
Dinner Buffet

□ Bronze Sponsor \$3,500

ncludes one golfer to participate in the day's events, full page program ad and tee signage.

□ Reception Sponsor \$1,500

Includes one individual to attend reception and dinner and full page ad in program book.

□ Green Sponsor \$750

Program Sponsor

- □ Full page Ad \$500
- Inside front cover \$1,000
- □ Inside back cover \$1,000
- Back cover \$1,500

Ad Specs

- Ad Size 7.5" W x 10" H
- Full-page bleeds cannot
- Final trim size: 8.5"W x 11"H
- Black and white
- Ad pages printed by Xerox Docutech
- Black & white ads will be accepted as Adobe Acrobat PDFs saved as a print-optimized (high resolution, minimum 300 dpi) no image compression and embedded fonts; or Adobe Photoshop 6.0 – CS (.tif, .eps, .psd, .jpg) saved at a minimum of 300 dpi, sized at 100%.

PLEASE MAKE CHECKS PAYABLE TO:

HRET, PO Box 828691, Philadelphia, PA 19182-8691 Enclosed is a check in the amount of \$

Contact

Company Name (if applicable)

Guest Names

Address

City, State, Zip

Phone

Fax

Day-of Contact (if package includes golfers) and Phone Number (in case of inclement weather)

Email

CREDIT CARD: CARD: American Express VISA CARD: Mastercard

Name as it appears on Credit Card

Billing Address

Credit Card Number

Signature

All ad copy must be received by **June 24** to ensure including in the program book. Due to production schedules, NJHA cannot guarantee ad placement after that date. Please send all ad copy to Jessica Perl, director, development & Trustee Relations, at jperl@njha.com.

This charitable organization is registered with the Attorney General of the State of New Jersey. Information concerning this charitable solicitation may be obtained by calling (973) 504-6215.

Important Dates

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For more information please call: 609-275-4224



Expiration Date on Card (CCV)