

**Virtual Fundraising Event**  
FRIDAY, MAY 29, 2020  
5:30 p.m.



[www.HackensackMeridianHealth.org/WHFVirtualEvent](http://www.HackensackMeridianHealth.org/WHFVirtualEvent)

## *Sponsorship Opportunities*

### ☐ \$10,000 PLATINUM SPONSORS

Includes 10 tickets with reserved seating, logo on invitation and website and full page virtual advertisement with most frequent views

### ☐ \$7,500 DIAMOND SPONSORS

Includes eight tickets with reserved seating, logo on invitation and website and full page virtual advertisement

### ☐ \$5,000 GOLD SPONSORS

Includes six tickets with reserved seating, logo on invitation and website and full page virtual advertisement

### ☐ \$2,500 SILVER SPONSORS

Includes four tickets, logo on website and full page virtual advertisement

### ☐ \$1,000 BRONZE SPONSORS

Includes two tickets and full page virtual advertisement

## *Virtual Journal Advertising*

Honor friends, family members or businesses in our virtual program with a tribute or testimonial, which will be displayed at the event. A hard copy will also be distributed to event guests.

☐ \$100 full page virtual advertisement ☐ Please use my same ad as last year. ☐ Attached is my camera ready artwork or print copy.

☐ Please use the following text to create my ad: \_\_\_\_\_

*Virtual advertising copy is due by May 15 and may be emailed to [michelle.lake@hackensackmeridian.org](mailto:michelle.lake@hackensackmeridian.org). JPEG, PDF, Word or PowerPoint files are accepted.*

## *50/50 Raffle Tickets*

\_\_\_\_\_ 50/50 Cash Raffle at \$20 per ticket  
\_\_\_\_\_ Ultimate Golf Raffle at \$100 per ticket  
\_\_\_\_\_ Super Raffle at \$100 per ticket

*(For more details, please see reverse side.)*

_____ Sponsorship	\$ _____
_____ Virtual Journal Advertisement for \$100	\$ _____
_____ 50/50 Cash Raffle Chances for \$20 each	\$ _____
_____ Ultimate Golf Cash Raffle Chances for \$100 each	\$ _____
_____ Super Raffle for \$100 each	\$ _____
_____ I am unable to attend but please accept my tax deductible contribution	\$ _____

Total participation \$ \_\_\_\_\_

**Register now at [HackensackMeridianHealth.org/HeartFund](http://HackensackMeridianHealth.org/HeartFund).**

\_\_\_\_\_  
Name/Company

\_\_\_\_\_  
Contact Person

\_\_\_\_\_  
Address

\_\_\_\_\_  
City/State/Zip

\_\_\_\_\_  
Email

\_\_\_\_\_  
Phone

\_\_\_\_\_  
Fax

☐ Payment Enclosed ☐ Invoice ☐ Charge

\_\_\_\_\_  
Signature required for invoicing or to process credit card charges

☐ Visa ☐ MasterCard ☐ Amex ☐ Discover

\_\_\_\_\_  
Credit Card No. Exp. Date Security Code

Please make checks payable to Meridian Health Foundation at 1340 Campus Parkway, Building C, Unit 4, Neptune, NJ 07753. For more details, please contact Michelle Lake, strategic events officer, at 516-426-1129 or [Michelle.Lake@hackensackmeridian.org](mailto:Michelle.Lake@hackensackmeridian.org).

If you do not wish to have your information used for fundraising purposes specific to this event, please notify Meridian Health Foundation by telephone at 732-751-5163 or email [FoundationOptOut@hackensackmeridian.org](mailto:FoundationOptOut@hackensackmeridian.org) with your contact information and request to opt out.