



Hackensack Meridian  
Riverview Medical Center  
Foundation



**Wednesday, July 3, 2024**

6:30 p.m. - 10 p.m.

The DiPiero Residence  
810 Navesink River Road, Locust, NJ 07760

## Sponsorship Opportunities

### \_\_\_\_\_ \$20,000 Presenting Sponsors

Logo on signage at entrance and throughout the event,  
logo on website, verbal recognition during fireworks intro,  
listing in press release and tickets for 14 guests

### \_\_\_\_\_ \$10,000 Fireworks Sponsors

Logo on signage at the event and on website,  
verbal recognition during fireworks intro, listing in  
press release and tickets for 10 guests

### \_\_\_\_\_ \$7,500 Title Sponsors

Logo on signage at the event and on website,  
listing in press release and tickets for eight guests

### \_\_\_\_\_ \$5,000 Entertainment Sponsors

Logo on signage near the entertainment, listing on website  
and in press release and tickets for six guests

### \_\_\_\_\_ \$3,500 Beverage & Food Truck Sponsors

Logo on signage near the food trucks, listing on website  
and in press release and tickets for four guests

### \_\_\_\_\_ \$1,500 Corporate Sponsors

Listing on website and in press release  
and tickets for two guests

## Tickets:

Adults at \$500 each \_\_\_\_\_

Children and Teens (five-20) at \$75 each \_\_\_\_\_

## Reservations

**Space is limited and early reservations are encouraged.**

**Visit [GiveHMH.org/RMCFireworks](http://GiveHMH.org/RMCFireworks) to register online.**

\_\_\_\_\_ Sponsorship \$ \_\_\_\_\_  
 \_\_\_\_\_ Reservations \$ \_\_\_\_\_  
 \_\_\_\_\_ I cannot attend, but please accept my fully deductible donation of: \$ \_\_\_\_\_  
**TOTAL PARTICIPATION:** \$ \_\_\_\_\_

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

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

\_\_\_\_\_  
Address

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

\_\_\_\_\_  
Email

\_\_\_\_\_  
Phone

Fax

Payment Enclosed \_\_\_\_\_ Invoice \_\_\_\_\_ Charge to (below) \_\_\_\_\_

Credit Card Type: \_\_\_ Visa \_\_\_ MasterCard \_\_\_ Amex \_\_\_ Discover

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

\_\_\_\_\_  
Credit card # Exp. Date Security Code

Please make check payable to Riverview Medical Center Foundation at 343 Thornall Street, 7th Floor, Edison, NJ 08837.  
For more information, please contact Hilary Cohen, executive director, Strategic Events, at [hilary.cohen@hmn.org](mailto:hilary.cohen@hmn.org) or 732-759-5814.

If you do not wish to have your information used for fundraising purposes specific to this event, please notify Riverview Medical Center Foundation by email at [strategievents@hmn.org](mailto:strategievents@hmn.org) with your contact information and request to opt out.