

ART SHOW

THURSDAY, SEPTEMBER 14, 2023 | 6 P.M.

Benefiting the expansion of Behavioral Health at
Hackensack Meridian Raritan Bay Medical Center

Sponsorship Opportunities

___ PRESENTING SPONSOR - \$50,000

Includes 20 tickets, reserved seating, logo on website, listing in press releases, verbal recognition at event, 'first look' during VIP reception, signage at event, and full-page virtual advertisement with most frequent views.

___ PLATINUM SPONSOR - \$25,000

Includes 10 tickets, reserved seating, logo on website, listing in press releases, 'first look' during VIP reception, signage at event, and full-page virtual advertisement

___ GOLD SPONSOR - \$10,000

Includes 4 tickets, logo on website, signage at event, and half-page virtual advertisement

___ SILVER SPONSOR - \$5,000

Includes 2 tickets, name on website, signage at event, and half-page virtual advertisement

___ BRONZE SPONSOR - \$2,000

Includes 1 ticket, name on website, signage at event

VIRTUAL ADVERTISING JOURNAL

Advertising will be featured on multiple screens throughout the evening. Virtual ad journal copy is due by Wednesday, August 30 and may be emailed to paige.cooper@hmn.org. JPEG, PDF or Word files will be accepted. If your ad is not received by Wednesday, August 30, we will create a name listing-only ad for you.

___ \$2,500 Full-page Gold level virtual advertisement

___ \$1,000 Full-page virtual advertisement

___ \$500 Half-page virtual advertisement

RESERVATIONS

___ \$125 Individual ticket

___ I cannot attend but wish to contribute \$___

Logo on invitation if sponsorship is confirmed
by Friday, June 23

Visit GiveHMH.org/RBMCArt to register online.

Name
(List personal or company name as you would like it to appear on any printed materials)

Contact Person

Address

City/State/Zip

Email

Phone

Enclosed is a check in the amount of \$_____
Please make checks payable to Raritan Bay Medical Center Foundation.

Charge my credit card in the amount of \$_____

___ Visa ___ MasterCard ___ Amex ___ Discover

Credit card # Exp. Date Security Code

Name on credit card

Signature

I/We do not wish to receive future mailings. Please remove my name from your list.

Mail to: Hackensack Meridian Health Foundation, 343 Thornall Street, 7th Floor, Edison, NJ 08837
Attn: Paige Cooper. For more information, please contact Paige Cooper, operations specialist, Strategic Events, at paige.cooper@hmn.org or 201-519-2446.

Please contact us at 848-275-1361 or FoundationOptOut@hmn.org if you wish to have your name removed from the list to receive fundraising requests supporting Hackensack Meridian Raritan Bay Medical Center Foundation in the future.

