

## SPONSORSHIP OPPORTUNITIES

No. \_\_\_\_\_ **TRUSTEE SPONSOR - \$10,000**

- Preferred seating for **20 guests** (2 tables)
- **Premier Full-Page ad** (full color on back cover, inside front cover or inside back cover) in our Ad Journal
- Display of company's banner (size up to 24" x 48")
- Premier corporate name/logo on promotional materials

No. \_\_\_\_\_ **BENEFACTOR SPONSOR - \$5,000**

- Preferred seating for **10 guests** (1 table)
- **Prominent Full-Page ad** in our Ad Journal
- Display of company's banner (size up to 12" x 24")
- Corporate name/logo on promotional materials

No. \_\_\_\_\_ **ENTERTAINMENT SPONSOR - \$2,500**

- Seating for **six (6) guests**
- **Full Page ad** in our Ad Journal
- Corporate name/logo on all promotional materials

No. \_\_\_\_\_ **COCKTAIL HOUR SPONSOR - \$1,000**

- Seating for **two (2) guests**
- **Quarter Page ad** in our Ad Journal
- Corporate name/logo on all promotional materials

No. \_\_\_\_\_ **LOGOED MEDIA WALL - \$400**

- Company's logo is placed on our Media Wall, a large banner located behind the red carpet. Photos will be taken in front of the Wall for added visibility.

No. \_\_\_\_\_ **INDIVIDUAL TICKET - \$185**

- One (1) ticket, cocktail reception, dinner, gift, and more....!

### ADVERTISING JOURNAL

FULL PAGE (8 x 10 1/2") ..... **\$1,000**

HALF PAGE (8 x 5") ..... **\$500**

QUARTER PAGE (4 x 5") ..... **\$ 250**

BUSINESS CARD (1.75 x 3.5") ... **\$100**

**Submit your ad and/or logo in .pdf or .jpeg format to:  
[xguevara@mcoha.org](mailto:xguevara@mcoha.org) no later than October 13, 2017.**

Please create my ad. Enclosed is the ad wording.

## DONOR INFORMATION

Your Name \_\_\_\_\_ Company \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_

Zip \_\_\_\_\_ Phone \_\_\_\_\_ Email \_\_\_\_\_

## SEATING RESERVATIONS

*Your Guests:*

- |            |             |
|------------|-------------|
| 1. - _____ | 6. - _____  |
| 2. - _____ | 7. - _____  |
| 3. - _____ | 8. - _____  |
| 4. - _____ | 9. - _____  |
| 5. - _____ | 10. - _____ |

I cannot attend but wish to make a donation of \$\_\_\_\_\_ (acknowledgement in program).

Cash or Check payable to **MCOHA** and mail it to 95-97 Bassett Highway, Dover, NJ 07801.

Credit card payments accepted online. Visit our website at [www.mcoha.org](http://www.mcoha.org) or call **973-366-4770**.

**Thank you for your gift and for your generous support.**

*MCOHA is a non-profit organization. Federal Tax Identification Number: 22-213-7333.*