

PROGRAM BOOK OPPORTUNITIES

Please complete the below form and the sponsorship pledge form **by Friday, April 5th.**

- | | | | |
|-----------------------|------------------------------|-----------------|-------|
| ◇ Centerfold: | \$5,000 (includes 4 tickets) | ◇ Silver Page: | \$750 |
| ◇ Outside Back Cover: | \$5,000 (includes 4 tickets) | ◇ Full Page: | \$500 |
| ◇ Inside Front Cover: | \$3,500 (includes 2 tickets) | ◇ Half Page: | \$300 |
| ◇ Inside Back Cover: | \$3,000 (includes 2 tickets) | ◇ Quarter Page: | \$150 |
| ◇ Rose Page: | \$2,000 | ◇ Name Listed: | \$100 |
| ◇ Gold Page: | \$1,000 | ◇ In Memory Of: | \$50 |

Page Sizes

Full Page: (8.5" x 11")

Half Page: (8.5" x 5.5")

Quarter Page: (4.25" x 5.5")

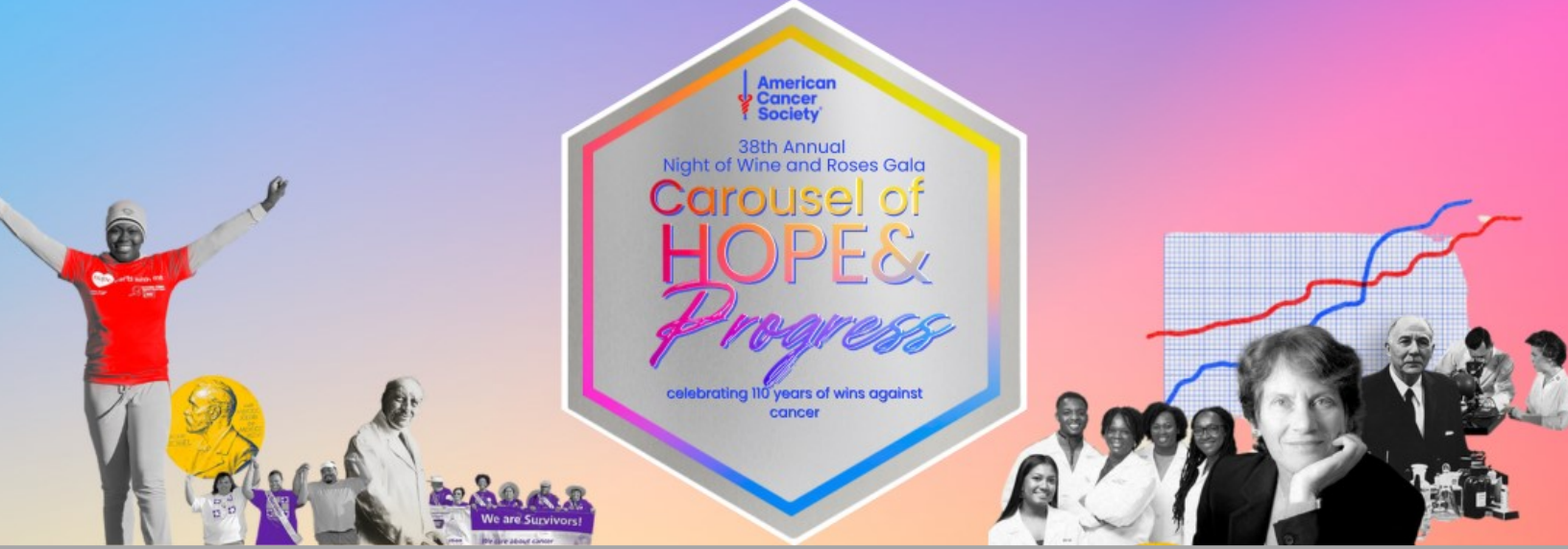
***Outside Back Cover, Inside Back Cover and Inside Front Cover are on a first-come, first-served basis.

Please provide all artwork, ad copy and messages, as you would like them to appear in the program book. Artwork should be sent electronically (via email) as a high-resolution PDF or JPEG file (no crop or bleed).

- ◇ I would like to repeat my ad from last year ◇ Typeset message printed below ◇ Emailing artwork

Please email all artwork and materials to Cara Haggerty and mail all payments to the American Cancer Society:

American Cancer Society
 Attn: Wine & Roses HBS98U
 PO Box P
 Manasquan, NJ 08736
 (p): 732.903.2061 | (e): cara.haggerty@cancer.org
 (w): www.wineandrosesgalanj.org



SPONSORSHIP & PROGRAM BOOK PLEDGE FORM

Sponsorships

◇ Presenting Sponsor	\$30,000	◇ Platinum Sponsor	\$10,000
◇ Legacy Sponsor	\$25,000	◇ Gold Sponsor	\$8,000
◇ Diamond Sponsor	\$20,000	◇ Silver Sponsor	\$5,000
◇ Ruby Sponsor	\$15,000	◇ Bronze Sponsor	\$3,500
◇ Emerald Sponsor	\$12,000	◇ Specialty Sponsor # _____	\$ _____

Program Book

◇ Centerfold:	\$5,000	◇ Silver Page:	\$750
◇ Back Cover	\$5,000	◇ Full Page:	\$500
◇ Inside Front Cover:	\$3,500	◇ Half Page:	\$300
◇ Inside Back Cover:	\$3,000	◇ Quarter Page:	\$150
◇ Rose Page:	\$2,000	◇ Name Listed:	\$100
◇ Gold Page:	\$1,000	◇ In Memory Of	\$50

◇ I would like to make a general mission donation of \$ _____

A check (made payable to the American Cancer Society) for \$ _____ is enclosed.

I would like to pay with my (circle one) Amex / MC / Visa / Discover
 Card# _____ Exp: _____ CVV: _____

Your Name: _____

Title: _____ Company: _____

Address: _____

City, State, Zip: _____

Phone: _____ Email: _____

Name as you would like to appear on signage

Signature: _____

Please send all forms and advertisements by **FRIDAY, APRIL 5th** to Keri Drako at
 American Cancer Society, Attn: Wine & Roses HBS98U, PO Box P, Manasquan, NJ 08736
 (p): 732.903.2061 | (e): Keri.Drako@cancer.org.