

PLEASE JOIN US AT THE

ZUFALL HEALTH CENTER

20th Anniversary Celebration

MONDAY, JUNE 20, 2011

MeadowWood Manor
461 Route 10 East
Randolph, New Jersey 07869

COCKTAIL AND DESSERT RECEPTION

6 – 9 pm

\$150 per person

OUR HONOREES

DR. ROBERT & KATHRYN ZUFALL

Zufall Health Center Founders

AND

THE HONORABLE RODNEY FREYLINGHUYSEN

United States Representative

Recipient — 2011 Founders Award



Zufall Health Center will be recognized by Reach Out and Read with its **FIRST ANNUAL BOB FRANKS MEMORIAL AWARD** which pays tribute to the late HealthCare Institute of New Jersey president for his contributions to promoting children's literacy.

SPONSORSHIP OPPORTUNITIES

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| EVENT SPONSOR | \$15,000 | Reserved seating for 10 Premier full page in Ad Journal Sponsorship recognition in Ad Journal Recognition from the podium On-site signage recognition Recognition in publicity |
| FOUNDERS TABLE SPONSOR | \$5,000 | Reserved seating for 10 Premier full page in Ad Journal Sponsorship recognition in Ad Journal Recognition from the podium |
| FRIENDS TABLE SPONSOR | \$2,500 | Reserved seating for 8 Full page in Ad Journal Sponsorship recognition in Ad Journal |
| TABLE CENTERPIECE SPONSOR | \$1,500 | Reserved seating for 6 Half Page in Ad Journal Sponsorship recognition in Ad Journal |

Please make your check payable to **Zufall Health Center**.

Please mail or fax completed form to:

Ms. Dawn Winters, Zufall Health Center • 17 South Warren Street • Dover, New Jersey 07801

Fax: 973.328.9101

COMMEMORATIVE ADVERTISING JOURNAL

FULL PAGE (5 x 8 in.) \$800

HALF PAGE (5 x 3.875 in.) \$400

COLLEAGUE (PHYSICIAN) LISTING \$250

Dr. Zufall, a former president of the medical staff at Saint Clare's Hospital, successfully practiced urology in Dover for many years before founding the health center. We invite his colleagues to honor him by including their names in this special list.

Ads may be submitted electronically as black and white artwork, 100% size, high resolution (300 dpi) pdf file with all fonts, photos, and art embedded. We can also create your ad from materials supplied by you.

**All ads must be received and paid in full
by Tuesday, May 31, 2011.**

Ads should be submitted to
dwinters@zuffallhealth.org.

SPONSORSHIP REPLY FORM

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AD JOURNAL:

Full Page Half Page Physician's Listing

Individual Ticket @ \$150 ea.

I cannot attend, but wish to make a donation of
\$ _____

Total amount enclosed is \$ _____

Charge my VISA MasterCard AmEx

*(Please note, for income tax purposes, all but \$50 of your contribution
is tax deductible.)*

CARD # _____ EXP. DATE _____

SIGNATURE _____

SEATING RESERVATIONS

YOU AND YOUR GUESTS:

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