



LOS ANGELES JEWISH HOME

EVENT SPONSORSHIP TRIBUTE JOURNAL FORM

TUESDAY, JANUARY 23, 2018

HONORING
MICHAEL HESLOV
AND
DANA ROBERTS

Please register online at www.lajh.org,
by mail using the enclosed envelope, or
by fax **818.342.0881**.

For additional information or
questions, please contact
Corey Slavin at **818.774.3031**
or **Corey.Slavin@jha.org**



LOS ANGELES JEWISH HOME
7150 Tampa Avenue
Reseda, California 91335
818-774-3031
fax 818-342-0881
www.lajh.org

PREFERRED SPONSORSHIP PACKAGES:

- REFLECTIONS PACKAGE** (2 available at this level) - **\$50,000**
Inside Front or Back Cover in Gala Tribute Journal and 3 Tables
- PLATINUM PACKAGE** - **\$25,000**
Platinum Page Ad and 2 Tables
- GOLD PACKAGE** - **\$10,000**
Gold Page Ad and 1 Table
- SILVER PACKAGE** - **\$7,500**
Silver Page Ad and 1 Table
- BRONZE PACKAGE** - **\$5,000**
Bronze Page Ad and 6 seats
- COPPER PACKAGE** - **\$2,500**
Copper Page Ad and 4 Seats
- BAR SPONSOR** - **\$10,000**
Full Page Ad, Prominent Recognition at Gala
- WINE SPONSOR** - **\$10,000**
Full Page Ad, Prominent Recognition at Gala
- PARKING SPONSOR** - **\$12,000**
Full Page Ad, Prominent Recognition at Gala

\$450 per Seat

\$4,500 per Table of 10

Full Page Ad - \$1,000

1/2 Page Ad - \$750

1/4 Page Ad - \$400

AD SPECIFICATIONS:

Full page ad dimensions are 8" wide x 8" high.

Half page ad dimensions are 8" wide x 4" high.

Quarter page ad dimensions are 4" wide x 4" high.

PLEASE SUBMIT BY ONE OF THESE METHODS:

- Digital artwork; jpeg, pdf (300 dpi)
electronically to denise.horowitz@jha.org
- Email your text or attach a word document
and send to denise.horowitz@jha.org
- Mail using the enclosed envelope, or
Fax this form to 818.342.0881

Additional sponsorship opportunities available.
Please contact Corey Slavin at 818.774.3031

**TRIBUTE JOURNAL AD AND ARTWORK DEADLINE IS
DECEMBER 15, 2017.
INVITATION TO FOLLOW.**

EVENT REGISTRATION

Name: _____

Business Name: _____

Address: _____

Business Home

Phone: _____

Business Home Cell

Email: _____

Tables and Seats - Names of Attendees and Guests

1. _____

2. _____

3. _____

4. _____

5. _____

6. _____

7. _____

8. _____

9. _____

10. _____

_____ Table(s) of 10 at \$4,500 _____ Individual seats at \$450

I/We are unable to attend but have enclosed a donation of
\$ _____

Name: _____

PAYMENT OPTIONS

Enclosed is my check made payable to the
Los Angeles Jewish Home in the amount of
\$ _____

Please charge my credit card in the amount of
\$ _____

VISA MasterCard American Express

Cardholder Name as it appears on card:

Card #: _____

Exp. Date: _____

For more information, please contact
Corey Slavin at **818.774.3031**.

TEXT FOR AD: PLEASE PRINT CLEARLY

Please print clearly - Must be received by
DECEMBER 15, 2017.

Name: _____

Package or Page Type: _____

Text: _____

*Please note: Your name or company name will be used
if no copy is submitted prior to the deadline.*

Tax Identification #95-3510024
Social Service Permit on File