

WOMEN'S AUXILIARY OF MOZAIC SENIOR LIFE

Fall Gala 2024

PLEASE RETURN BY FRIDAY, SEPTEMBER 27, 2024

Name _____

Address _____

City/State/Zip _____

Telephone: Home/Cell _____

Email _____

To register online, please visit:

www.mozaicsl.org/donations/womens-auxiliary-donations/fall-gala/

Enclosed is my check for \$ _____
made payable to the Women's Auxiliary

Please charge my credit card \$ _____
 Master Card Visa American Express

I would like to increase my donation by 2% to cover the cost
of credit card processing fees.

Account # _____

Exp. Date _____ Sec. Code _____

Signature _____

Please provide copy for your journal ad below or email camera-ready art
as a 300 DPI PDF or JPG to sfreed@mozaicsl.org by Friday, September 27.

The printed area sizes are: Full Page: 7"W x 7.75" H, Half Page: 7" W x 3.5" H,
Quarter Page: 3.375" W x 3.5" H

Journal Copy: _____

Your gift in excess of the \$200 per person dinner value is deductible as a charitable
contribution to Mozaic Senior Life.

Please complete journal and attendance/seating information on reverse side. →

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COMMEMORATIVE JOURNAL & RESERVATIONS

FULL PAGE OPPORTUNITIES

- BUILDER..... \$ 25,000 Includes 12 Reservations*
- BENEFACTOR..... \$ 10,000 Includes 8 Reservations**
- PATRON..... \$ 5,000 Includes 6 Reservations
- PILLAR \$ 2,500 Includes 4 Reservations
- GUARDIAN \$ 1,500 Includes 2 Reservations
- SUPPORTER..... \$ 1,200 Full Page Only

ADDITIONAL OPPORTUNITIES

- DONOR..... \$ 600 Half Page
- FRIEND \$ 300 Quarter Page
- BUSINESS CARD..... \$ 200 Business Card
- LISTING..... \$ 136 Name Only

* Includes Back Cover ** Includes Inside Front or Back Cover

All ads will be recognized by category in the next issue of Mozaic Senior Life's newsletter, *Chai Lights*.

Check here if you do not want to be included in the newsletter listing.

GALA RESERVATIONS

- RESERVATION..... \$ 325 Per Person

Please seat me/us with (tables of 8-12) _____

I/we are unable to attend but wish to make a donation of \$ _____
in honor of _____

- KOSHER MEAL PREFERRED

Questions? Contact Beth Tepper at 203-396-1000 or btepper@mozaicsl.org

Please complete payment information on reverse side. ---->