



With
CHRISTIE BRINKLEY

Wednesday, June 7, 2017

VIP Celebrity Reception

11:00 AM—12:00 PM

Lunch 11:30 AM—2:00 PM

Sponsor Opportunities & Seat Information



Benefactor \$30,000	Premier seating for 2 tables of 10 Recognition from podium Private Celebrity Photo op for 4 20 to VIP Celebrity Reception Premier on-screen journal & printed program listing	Corporate Step & Repeat \$10,000	Prime reserved seats for 8 guests 8 to VIP Celebrity Reception Logo/Name on Step & Repeat with ROH logo Greeters at Step & Repeat Photo frame giveaway opportunity with name/logo on souvenir frames for all guests Prime on-screen journal & printed program listing
Rose of Courage \$25,000	Premium seating for 2 tables of 10 Recognition from podium Private Celebrity Photo op for 3 20 to VIP Celebrity Reception Premium on-screen journal & printed program listing	Rose of Compassion \$5,000	Preferred reserved seats for 5 guests 5 to VIP Celebrity Reception Preferred on-screen journal and printed program listing
Rose of Humanity \$15,000	Priority seating for 1 table of 12 Recognition from podium Private Celebrity Photo op for 2 12 to VIP Celebrity Reception Priority on-screen journal & printed program listing	Rose of Support \$1,000	Reserved Seat for 1 1 to VIP Celebrity Reception On-screen journal and printed program listing
Rose of Strength \$10,000	Prime seating for 1 table of 10 10 to VIP Celebrity Reception Prime on-screen journal & printed program listing	Individual Rose \$375/per	Seat/seats at luncheon Indicate Quantity #_____
		Patient Sponsor \$375/per	Seat/seats at luncheon for a patient: Indicate Quantity #_____
		DONATION ONLY	I/We are unable to attend, but would like to make a donation of \$_____

Sponsor levels of \$10,000+ include pre-plated meals for all guests

Reservations are held at the door. Seating is Limited.

All but \$100 of your contribution, per person, is tax deductible.

Tax ID #22-2908698

The Rose of Hope Luncheon is a signature event to raise funds to support Norma Pfriem Breast Center's Medically Underserved Initiative and provide education and outreach programs.

Name _____ Phone _____ Email _____

(As you wish it to appear for Sponsorship)

Address _____ City, State, Zip _____

_____ Please charge my credit card \$ _____ Credit Card # _____ Exp Date _____

_____ Enclosed is my check in the amount of \$ _____ payable to "NPBC"

Mail this form with your check
payable to BHF/NPBC to:

Rose of Hope Luncheon
Norma Pfriem Breast Center
111 Beach Road
Fairfield, CT 06824

Lead Corporate Event Sponsor



Merrill Lynch

Bank of America Corporation

Celebrity Reception Sponsor



Car Sponsor



FAIRFIELD

Event Sponsor

DeMattia Charitable Foundation

Event Benefactor

Irwin W & Dorothy M Nessel

Family Foundation

In Memory of Amy Nessel

Or Register Online at <http://tinyurl.com/ROH2017>