

REGISTRATION FOR THE 2018 RED LANTERN GALA | SATURDAY, NOVEMBER 3, 2018

DONOR NAME(as it should be acknowledged in print):

LAST NAME:

FIRST NAME:

COMPANY/TITLE:

MAILING ADDRESS:

CITY:

STATE:

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CONTACT PHONE:

CONTACT EMAIL*:

DINNER PARTY NAME:

**Please provide a valid e-mail address. Your gala registration ticket will be sent to you by e-mail.*

DINNER AT PIER 60

\$600 per person *Door price: \$700 per person

\$5,000 Per Table for 10

\$10,000 VIP Table for 10

SPONSORSHIP PACKAGES

DIAMOND \$40,000 AND UP

Full-color Inside Front or Inside Back Cover Advertisement in Gala Journal
• Customized message & logo to be featured during the Gala Slideshow
• VIP Table For 10 • Exhibition Booth during the Annual Scientific Conference • Acknowledgement at Lunch • Company logo & link on CAMS website • Full-color banner hung in gallery during Annual Conference & Gala.

PLATINUM \$25,000

Full-color Journal Advertisement • Customized message & logo to be featured during the Gala Slideshow • VIP Table for 10 • Exhibition Booth during Annual Scientific Conference • Company logo & link on CAMS website

GOLD \$15,000

Full-color Journal Advertisement • Customized message & logo to be featured during the Gala Slideshow • VIP Table for 10 • Company logo & link on CAMS website

SILVER \$10,000

Full-color Journal Advertisement • Customized message & logo to be featured during the Gala Slideshow • 6 Seats for Dinner • Company logo & link on CAMS website

GALA JOURNAL ADVERTISING

- \$3,000 FULL PAGE COLOR ADVERTISEMENT
- \$2,000 FULL PAGE BLACK & WHITE ADVERTISEMENT
- \$1,500 HALF PAGE BLACK & WHITE ADVERTISEMENT
- JOURNAL ADVERTISING \$ _____
- DINNER TICKETS \$ _____
- TABLE SPONSOR \$ _____
- I AM UNABLE TO ATTEND THIS
EVENT, BUT WISH TO CONTRIBUTE \$ _____
- TOTAL DUE:** \$ _____

MY PAYMENT IN THE AMOUNT OF \$ _____ IS ENCLOSED.

Please make all checks payable to: Chinese American Medical Society

OR

PLEASE CHARGE MY:



NAME ON CARD: _____

CARD NUMBER: _____

CARD EXPIRATION DATE (MO/YR): _____ / _____

BILLING ZIP CODE: _____ SECURITY CODE: _____

AUTHORIZED SIGNATURE: _____

New

JOURNAL AD SPECIFICATIONS

FULL PAGE:

VERTICAL (8.5" W X 11" H)

HALF PAGE:

HORIZONTAL (8.5" W X 5.5" H)

DEADLINES

JOURNAL AD SUBMISSION:

OCTOBER 2, 2018

GALA REGISTRATION:

OCTOBER 19, 2018

GUEST LIST:

OCTOBER 26, 2018

Please submit all information to:

Jamie Love at jlove@camsociety.org

Journal Ads & Tickets are not guaranteed without payment. All sales are final.

MAIL TO

CAMS

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