

## **New Hope, Inc., PO Box 8763, Woodcliff Lake, NJ 07677**

Please reserve the following for: (Please print name)

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\_\_\_\_\_ Tickets at \$85 each    Total \$ \_\_\_\_\_ Check enclosed.

Please make check payable to New Hope, Inc., a 501 (c) (3) organization.

See reverse side to charge on a credit card.

My email address is: \_\_\_\_\_

I would like to be seated with:

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I am unable to attend. Please accept my gift of \$ \_\_\_\_\_ for your work.

Please contact Kathy Turlick with any questions: (201) 519-5149 or kturlick@gmail.com



### Journal Ads - Deadline: April 1, 2017

Please attach a camera ready ad, a business card or a message and send to: *Margaret Scully, New Hope, Inc., PO Box 8763, Woodcliff Lake, NJ 07677*  
Phone: (201) 805-0937 Email: scullyfam@yahoo.com

#### Message:

#### Journal Advertisements

- Full page (inside covers and back cover)... \$350
- Full page (5" x 8") ..... \$250
- Half page (5" x 3 1/2") ..... \$150
- Quarter page (3 1/2" x 2") ..... \$100

#### Journal Sponsorships

- Benefactor.....\$200
- Sponsor .....\$100
- Patron .....\$ 50

Please print your name below as you wish it to appear:

### Journal Ad and Tickets for Gala Payment

Make all checks payable to: New Hope, Inc.

Check Enclosed

Please visit [www.newhopeprc.org](http://www.newhopeprc.org) to use PayPal or a credit card or fill in the credit card information below; return to Margaret Scully as above:

Visa  Master Card  Amex

Total amount to be charged: \$ \_\_\_\_\_

Credit Card #: \_\_\_\_\_

Expiration Date: \_\_\_\_\_

Security Code (3 number code on back of card): \_\_\_\_\_

Name as it appears on card:

\_\_\_\_\_

Billing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

E-mail: \_\_\_\_\_

Signature:

\_\_\_\_\_

Date: \_\_\_\_\_