

# Bloomfield Educational Foundation 2020 Annual Gala

Purchase ads by Nov. 2, 2020. Ticket RSVP by Nov. 6, 2020

Name: \_\_\_\_\_

Street: \_\_\_\_\_

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

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

Reserved seating is available for full tables of 10-12 guests. Please indicate your guests' names on the back of this reply card if you are purchasing a table.

\_\_\_\_ I cannot attend but would like to make a donation of \_\_\_\_\_.

## Commemorative Program Book Ad Purchase: (Artwork due by 11/6/2020\*)

Please reserve the following ad space:

____ Back Cover - 5 1/2" wide x 7 1/2" high	Cost: \$1200.00
____ Inside Front Cover - 5 1/2" wide x 7 1/2" high	Cost: \$ 800.00
____ Full Page - 5 1/2" wide x 7 1/2" high.	Cost: \$ 400.00
____ Half Page - 7 1/2" wide x 3 1/2" high	Cost: \$ 200.00
____ Quarter Page - 2 3/4" wide x 3 1/2" high	Cost: \$ 100.00
____ Eighth Page - 2 3/4" wide x 1 3/4" high	Cost: \$ 50.00

## Payment Information:

\_\_\_\_ Enclosed is payment for \_\_\_\_ Adult ticket(s) @ \$100 each.

\_\_\_\_ Enclosed is payment for \_\_\_\_ Youth tickets (12 & under) at \$50 ea.

\_\_\_\_ Enclosed is payment of \_\_\_\_\_ for my ad purchase.

\_\_\_\_ Please charge my \_\_\_\_ Visa \_\_\_\_ Mastercard: \_\_\_\_\_ Total

\_\_\_\_ I am enclosing a check made out to the BEF for \_\_\_\_\_ Total

Name on Card: \_\_\_\_\_

Account#: \_\_\_\_\_

Expiration Date: \_\_\_\_\_ Security Code: \_\_\_\_\_

Signature: \_\_\_\_\_

*Please send all payments and guest reservations to:*

**BEF Dinner Headquarters, 14 Hatfield St., Caldwell, NJ 07006.**

*\* Artwork can be emailed to  
info@bloomfieldeducationalfoundation.org*