

*Children's Cancer Fund*  
*Eighteenth Annual Teddy Bear Ball*  
*May 1, 2010*

**RSVP AND JOURNAL PARTICIPATION DEADLINE: APRIL 9, 2010**

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

Company: \_\_\_\_\_

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

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

Email: \_\_\_\_\_ Telephone: \_\_\_\_\_ Fax: \_\_\_\_\_

**GUEST TICKETS**

Please reserve \_\_\_\_\_ guest tickets at \$250 per person.\*  
*(Please see below for package options.)*

Please reserve \_\_\_\_\_ guest tickets at \$150 per person.\*  
*(For patients and their parents only)*

I am unable to attend, but would like to make a donation of \$\_\_\_\_\_.

I would like to make a donation to the *Dr. Somasundaram Jayabose Scholarship Fund* of \$\_\_\_\_\_.  
*(Please make separate check.)*

Please reserve \_\_\_ tables of 10 at \$2,500 per table.

*If you purchase a table you will receive 10 individual invitation cards for your guests in the mail.*

**DINNER/JOURNAL PACKAGES**

- |  |         |
|--|---------|
| <input type="checkbox"/> Back Cover and 2 tables of 10 guests*         | \$7,700 |
| <input type="checkbox"/> Inside Front Cover and 2 tables of 10 guests* | \$7,250 |
| <input type="checkbox"/> Inside Back Cover and 2 tables of 10 guests*  | \$6,800 |
| <input type="checkbox"/> Full Page and 1 table of 10 guests*           | \$3,180 |

**JOURNAL ADVERTISING**

- |   |       |
|---|-------|
| <input type="checkbox"/> Full Page (7.5" x 10")                       | \$900 |
| <input type="checkbox"/> Half Page (7.5" x 4.5")                      | \$450 |
| <input type="checkbox"/> Quarter Page (3.5" x 4.5")                   | \$225 |
| <input type="checkbox"/> Business Card (3.5" x 2")                    | \$135 |
| <input type="checkbox"/> In Memory of (25 word maximum-please attach) | \$75  |
| <input type="checkbox"/> In Honor of (25 word maximum-please attach)  | \$75  |

*This years' pricing reflects a 10% discount on journal advertising with the exception of In Honor of and In Memory of Donations.*

**AD SUBMISSION GUIDELINES:**

Please submit camera-ready artwork or clearly typed or printed text. Digital files will be accepted in the following formats:

- High-quality PDF
- Microsoft Word
- Quark XPress (Macintosh)
- Illustrator
- JPEG (600 dpi or higher).

Any included graphics and/or fonts must be supplied.

Amount enclosed and payable to *Children's Cancer Fund*: \$\_\_\_\_\_

**\*PLEASE LIST ALL GUESTS IN YOUR PARTY  
(INCLUDING YOURSELF) ON REVERSE SIDE**

## GUEST LIST (10 GUESTS PER TABLE MAXIMUM)

Please provide your name(s) and the names of your guests and choice of entrée(s):

	Blue Cheese Crusted Filet Mignon	Truffle Chicken	Grilled Swordfish Palermo	Grilled Vegetable Napolean
1. _____	_____	_____	_____	_____
2. _____	_____	_____	_____	_____
3. _____	_____	_____	_____	_____
4. _____	_____	_____	_____	_____
5. _____	_____	_____	_____	_____
6. _____	_____	_____	_____	_____
7. _____	_____	_____	_____	_____
8. _____	_____	_____	_____	_____
9. _____	_____	_____	_____	_____
10. _____	_____	_____	_____	_____

**Please return this form, journal advertisement materials, and payment to:**

**Children's Cancer Fund  
c/o Amy Murphy  
54 Danbury Road, Box 347  
Ridgefield, CT 06877**

**For credit card payments or more information:**

**Amy Murphy, Administrative Coordinator  
Telephone: (203) 979-6404 • Fax: (203) 621-3335  
Email: [cfconsultingllc@hotmail.com](mailto:cfconsultingllc@hotmail.com)**

*The Children's Cancer Fund is a not-for-profit charitable 501(c)(3) corporation.  
Contributions are tax-deductible to the fullest extent of the law.*

**[www.childrenscancerfund.org](http://www.childrenscancerfund.org)**