

harvard | business | school Club of New York

Please add my/our name to the **Committee** and reserve the following:

CRIMSON CIRCLE AT \$100,000: Includes premium seating for a table of 10 guests; a complimentary journal ad with premium cover position and listing in the evening's printed journal; special mention from the podium; corporate logo on video screen.

____ GOLD CIRCLE AT \$50,000: Includes priority seating for a table of 10 guests; a complimentary full-page black & white journal ad and listing in the evening's printed journal; corporate logo on video screen.

SILVER CIRCLE AT \$25,000: Includes prime seating for a table of 10 guests; a complimentary full-page black & white journal ad and listing in the evening's printed journal; corporate logo on video screen.

PATRON (NON-MEMBER) TICKET(S) AT \$1,000 EACH (A maximum of 2 tickets can be guaranteed to be seated together)

____HBSCNY MEMBER TICKET(S) AT \$500 EACH (limit 2)

__RECENT HBS GRADUATE TICKET(S) AT \$250 EACH Class of 2012-2017 (limit 2, includes one year of HBSCNY membership)

I wish to be seated with: _

(CLASS OF/SPECIFIC INDUSTRY/GUEST NAME)

__I am unable to attend, but wish to contribute \$_

To purchase tables, tickets or journal ads online, please visit www.HBSCNY.org

JOURNAL ADVERTISEMENTS

Back Cover	\$20,000
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- □ Inside Back Cover \$20,000
- □ Inside Front Cover \$20,000
- □ Full-Page black & white \$5,000
- □ Half-Page black & white \$2,500

JOURNAL SPECIFICATIONS: Trim Size of Journal: 10"w x 7"h. Live area for Full-page: 8"w x 5.5"h, Live area for Half-page: 3.875"w x 5.5"h. All ads print in black & white. Preferred format is high-resolution PDF with all images and fonts embedded; 300 dpi .psd, .tiff or .jpeg files are acceptable. Artwork and logos can be emailed to HBSCNY@cmevents.net. Ads supplied in Microsoft Word will be reformatted. ALL ADS MUST BE RECEIVED BY MONDAY, APRIL 23, 2018. please complete reverse side

LISTING I wish to be listed on printed materials by Name and/or Company (Please print below exactly how you wish to be listed)

NAME	HBS CLASS	
TITLE	COMPANY	
ADDRESS		
CITY/STATE/ZIP		
DAYTIME PHONE	FAX	
EMAIL		
Enclosed is a check for:	made payable to HBSCN	Y (Tax ID 13-615-9699)
□ Please charge my: □ Visa □ Mastercard	American Express	
CREDIT CARD NUMBER	EXP. DATE	SEC. CODE
NAME ON CARD	SIGNATURE	
BILLING ADDRESS (if different from above)		

CITY/STATE/ZIP

Contributions are fully tax-deductible. The non-deductible portion of each ticket is \$265. Kindly complete this form and mail all payments to: HBSCNY Leadership Dinner Benefit Office, c/o CMI Events, 1325 Sixth Avenue, 27th Floor, New York, NY 10019. For further information, please contact phone: 347.545.1844 fax: 212.763.8577, email: HBSCNY@cmevents.net. The Harvard Business School Club of NY is a charitable organization under section 501(c)3 of the Internal Revenue Service Code.

_ My guests are **OR** ____ I wish to be seated with:

1	6	
2	7	
3	8	
4	9	
5	10	