

ISRAEL CANCER RESEARCH FUND
CONNECTICUT CHAPTER

An Evening of Hope

Tower of Hope Honoree: **JERRY SILBER**

Community Partner: **TEMPLE SINAI OF STAMFORD**

Sponsorship Levels

- Tables of Hope \$36,000+
Four premium tables of ten
- Tables of Science \$18,000+
Three premium tables of ten
- Tables of Health \$10,000+
Two premium tables of ten
- Table of Challenge \$5,000+
One premium table of ten
- Table of Cure \$3,100+
One table of ten
- Table of Inspiration \$2,500+
One table of eight
- Tomorrow Package \$1,000+
Two tickets

Please visit icrfonline.org/cthope2024 for a full list of sponsorship opportunities.

Attendance

- Ticket \$350
Number of Tickets: _____
- Young Professionals Ticket
(Under Age 40) \$200
Number of Tickets: _____

Donation

Donation: \$ _____

- I wish to make a donation to Israel Cancer Research Fund to help shape the future of innovative cancer research.

Tributes

Does not include entry to the event.

- Champion Tribute* \$1,000
Two tributes on event slideshow
- Supporter Tribute* \$500
One tribute on event slideshow
- Friend Listing \$180
Individual or company name on event slideshow

*Select one of the following texts or compose your own tribute:

- Mazel Tov to the 2024 Honoree, Jerry Silber!
- Mazel Tov to Temple Sinai of Stamford for being recognized as our community partner!
- Congratulations to the Israel Cancer Research Fund for supporting groundbreaking cancer research!
- Please use the following text for my tribute:

If you would like to submit a tribute (1280px W x 720px H) or a logo or have any questions regarding tributes, please contact David Kweskin at david.kweskin@icrfonline.org.

Name (as you would like it listed on recognition materials):

Names of my guests and/or those I wish to be seated with:

Address: _____

City, State, Zip: _____

Phone Number: _____

Email: _____

Payment Information

Enclosed is a check, made payable to: Israel Cancer Research Fund

Please charge my credit card: \$

Yes, please add 3% to cover processing fees.

Cardholder Name: _____

Card Number: _____

CVV: _____ Exp. Date: _____ Billing Zip Code: _____

Signature: _____

You may also purchase tickets, sponsorships, tributes and donations online at icrfonline.org/cthope2024. *Thank you for your support!*

Kindly respond by Monday, September 9, 2024

Mail to: Israel Cancer Research Fund, P.O Box 36, Hartsdale, NY 10530

Questions: david.kweskin@icrfonline.org | 347.503.1636.

icrfonline.org

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