

COMMITTEE

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DIANE CIANCIA

FLAVORS OF THE JERSEY SHORE

MONMOUTH MEDICAL CENTER
SOUTHERN CAMPUS FOUNDATION

PRESENTS

FOOD & WINE FESTIVAL



VENDORS

709

ATLANTIC BAR & GRILL- CHEF MIKE'S AGB

BEACH HAUS BEER

BROOKLYN SQUARE PIZZA

BUM ROGERS CRAB HOUSE

DEVIL BROWNIES

DUNKIN DONUTS / BASKIN ROBBINS

EDRINGTON AMERICAS

FALCO'S CATERING

FAMOUS DAVE'S BBQ

FILIPINO GRILL

FRATELLO'S ITALIAN RESTAURANT

HARPOON WILLY'S

J. LOHR

LABRADOR LOUNGE

MOET HENNESSY USA

MR. SHRIMP SEAFOOD

OCEAN COUNTY VOCATIONAL SCHOOL OF CULINARY ARTS

PRIME 13

RAMTOWN WINE & LIQUORS

SOLO BELLA

SUPER BUY RITE OF TOMS RIVER

WINDWARD TAVERN

YUSSI'S GRILL

...AND MORE!

MONMOUTH MEDICAL CENTER SOUTHERN CAMPUS FOUNDATION'S

FLAVORS OF THE JERSEY SHORE

FOOD & WINE FESTIVAL

OCTOBER 22, 2015

PINE BELT CHEVROLET SHOWROOM

ROUTE 88 / OCEAN AVENUE • LAKEWOOD, NJ 08701

VIP PREVIEW

FOOD SALON EXPERIENCE BY CELEBRITY CHEF JOE LEONE

5:30 PM - 6:30 PM • \$125 PER PERSON

INCLUDING PRIVATE TASTING WITH PREMIUM SPIRITS IN OUR VIP TENT

INCLUDES GENERAL ADMISSION

GENERAL ADMISSION • 6:00 PM - 9:00 PM • \$75 PER PERSON

VALET PROVIDED • LIVE MUSIC BY THE MIKE DALTON BAND

PROCEEDS TO BENEFIT THE CANCER SERVICES AT
MONMOUTH MEDICAL CENTER SOUTHERN CAMPUS FOUNDATION

MONMOUTH MEDICAL CENTER
SOUTHERN CAMPUS FOUNDATION

PRESENTS

FLAVORS OF THE JERSEY SHORE

FOOD & WINE
FESTIVAL



REPLY CARD

NAME _____

COMPANY _____

ADDRESS _____

CITY _____ STATE _____ ZIP _____

PHONE _____ EMAIL _____

MY NAME AS I WOULD LIKE IT TO APPEAR ON PRINTED MATERIALS:

☐ PLEASE RESERVE _____ GENERAL TICKETS (\$75 EA.) TOTAL \$ _____

☐ PLEASE RESERVE _____ VIP TICKETS (\$125 EA.) TOTAL \$ _____

SPONSORSHIP LEVELS: ☐ \$5,000 ☐ \$3,000 ☐ \$1,500

METHOD OF PAYMENT: ☐ VISA ☐ MASTERCARD ☐ AMEX

CC# _____ EXP. ____/____ SEC. CODE _____

☐ CHECK (*PAYABLE TO MONMOUTH MEDICAL CENTER SOUTHERN CAMPUS FOUNDATION*)

SIGNATURE _____

PLEASE SEND IN YOUR REPLY AND/OR AD BY OCTOBER 9TH.

REGISTER ONLINE AT WWW.BARNABASHEALTH.ORG/FLAVORSOFTHEJERSEYSHORE

SPONSORSHIP OPPORTUNITIES

\$5,000

- SIGNAGE AT THE EVENT AND ALL COLLATERAL MATERIALS
- MENTION OF YOUR BUSINESS IN EVENT PRESS RELEASES
- PRE-PUBLICITY IN THE ASBURY PARK PRESS
- 16 GENERAL ADMISSION TICKETS AND 6 VIP TICKETS
- INSIDE FRONT OR BACK COVER IN PROGRAM
(FIRST COME, FIRST SERVED)

\$3,000

- SIGNAGE AT THE EVENT
- MENTION OF YOUR BUSINESS IN PRESS RELEASES
- PRE-PUBLICITY IN THE ASBURY PARK PRESS
- 10 GENERAL ADMISSION TICKETS AND 4 VIP TICKETS
- FULL PAGE IN PROGRAM

\$1,500

- SIGNAGE AT THE EVENT
- MENTION OF YOUR BUSINESS IN PRESS RELEASES
- PRE-PUBLICITY IN THE ASBURY PARK PRESS
- 8 GENERAL ADMISSION TICKETS AND 2 VIP TICKETS
- FULL PAGE IN PROGRAM

QUESTIONS?

CONTACT MARIA NELSON AT 732.886.4438
OR EMAIL MANELSON@BARNABASHEALTH.ORG

PLEASE E-MAIL, FAX OR MAIL YOUR COMPLETED REPLY CARD BY OCTOBER 9TH

MONMOUTH MEDICAL CENTER SOUTHERN CAMPUS FOUNDATION
600 RIVER AVENUE
LAKEWOOD, NEW JERSEY 08701

FAX 732.942.5643

MECHANICAL REQUIREMENTS FOR FULL PAGE ADS: 5.5" WIDE X 8.5" TALL

PLEASE EMAIL PDF OR JPEG AD FILE BY OCTOBER 9TH TO:
MANELSON@BARNABASHEALTH.ORG

REGISTER ONLINE AT WWW.BARNABASHEALTH.ORG/FLAVORSOFTHEJERSEYSHORE

ALL PROCEEDS BENEFIT THE MONMOUTH MEDICAL CENTER SOUTHERN CAMPUS FOUNDATION.
THE MONMOUTH MEDICAL CENTER SOUTHERN CAMPUS FOUNDATION IS A 501 (C) (3) NOT-FOR-PROFIT ORGANIZATION; OUR FEDERAL ID # 222-630076. IF YOU PREFER NOT TO RECEIVE MAIL FROM US, PLEASE CALL 732-886-4151 OR INDICATE ON THIS REPLY SLIP THAT YOUR NAME SHOULD BE REMOVED FROM OUR MAILING LIST. PLEASE NOTE: IT IS THE POLICY OF THE BARNABAS HEALTH FOUNDATIONS THAT 10% OF DONATIONS MAY BE USED FOR ADMINISTRATIVE AND OPERATIONAL EXPENSES.