



Somerset Health Care Foundation

# CARPE DIEM Dinner

BENEFITTING PAUL'S PLACE AND FAR HILLS RACE MEETING ASSOCIATION ONCOLOGY PATIENT ASSISTANCE AT RWJUH SOMERSET

**October 19, 2026**

**Matt's Red Rooster Grill, Flemington, NJ**  
Reservations beginning at 5:30 p.m.

*Event space is limited.*

**Sponsorships are limited to 2 per category – get yours before we sell out!**

**Platinum Sponsor ..... \$10,000**

Includes Dinner for 12 in Matt's Private Dining Room, name/logo on menu, full-page ad in journal, name on the Steeplechase Cancer Center donor wall

**Gold Sponsor..... \$5,000**

Includes Dinner for 8, name/logo on menu, full-page ad in journal, name on the Steeplechase Cancer Center donor wall

**Silver Sponsor .....\$2,500**

Includes Dinner for 6, name on menu, full-page ad in journal, name on the Steeplechase Cancer Center donor wall

**Menu Sponsor .....\$1,250**

Includes Dinner for 2, name on menu, half-page ad in journal, name on the Steeplechase Cancer Center donor wall

**Passed Appetizer Sponsor.....\$1,250**

Includes Dinner for 2, name on menu, half-page ad in journal, name on the Steeplechase Cancer Center donor wall

**First Course Sponsor .....\$1,250**

Includes Dinner for 2, name on menu, half-page ad in journal, name on the Steeplechase Cancer Center donor wall

**Soup/Salad Sponsor.....\$1,250**

Includes Dinner for 2, name on menu, half-page ad in journal, name on the Steeplechase Cancer Center donor wall

**Entree Sponsor .....\$1,250**

Includes Dinner for 2, name on menu, half-page ad in journal, name on the Steeplechase Cancer Center donor wall

**Dessert Sponsor .....\$1,250**

Includes Dinner for 2, name on menu, half-page ad in journal, name on the Steeplechase Cancer Center donor wall

**Signature Cocktail Sponsor .....\$1,250**

Includes Dinner for 2, name on menu, half-page ad in journal, name on the Steeplechase Cancer Center donor wall

**Wine Sponsor .....\$1,250**

Includes Dinner for 2, name on menu, half-page ad in journal, name on the Steeplechase Cancer Center donor wall

**Dinner Guest..... \$200**

**ADVERTISING OPPORTUNITIES**

The journal is an excellent way to promote your business/ organization, share a personal note about Paul's Place or send an encouraging message to the patients at Robert Wood Johnson University Hospital Somerset.

**Outside Back Cover (4-Color).....\$1,000**

**Inside Front Cover (4-Color).....\$750**

**Inside Back Cover (4-Color).....\$750**

**Full-Page (4-Color).....\$500**

**Half-Page (4-Color).....\$300**

**ADVERTISEMENT PRODUCTION SPECIFICATIONS**

Deadline for submissions of ads and payment:

Friday, September 25, 2026.

Souvenir Book Dimensions:

Full-Page 5" x 8"

Half-Page 5" x 4"

Digital Board Dimensions: png file (landscape)

\* If you prefer, we can design a journal ad for you. Simply email your content information and/or photograph to Heather.Vail@rwjhb.org before September 12, 2026.

**AD REQUIREMENTS**

- Electronic files are required for all ads.
- Files must be submitted as high resolution PDF or JPG.
- All ads are subject to acceptance by Somerset Health Care Foundation.
- Email artwork to: [SHCF@rwjhb.org](mailto:SHCF@rwjhb.org).

*Proceeds benefit the Somerset Health Care Foundation, which supports Paul's Place at Robert Wood Johnson University Hospital Somerset, and a portion of your sponsorship is tax-deductible.*

*Information filed with the New Jersey Attorney General concerning this charitable solicitation and the percentage of contributions received by the charity during the last reporting period that were dedicated to the charitable purpose may be obtained from the Attorney General of the State of New Jersey by calling (973) 504-6215 and is available on the internet at [www.state.nj.us/lps/ca2/charities](http://www.state.nj.us/lps/ca2/charities). Registration with the Attorney General does not imply endorsement. Federal ID Number: 22-3294408.*

*It is the policy of the Foundations of RWJBarnabas Health that 10% of restricted gifts and up to 10% of special events revenue is allocated for unrestricted purposes which may include administrative and operational expenses.*

**RWJBarnabas  
HEALTH**

**Robert Wood Johnson  
University Hospital  
Somerset**



**Please reserve the following:**

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

Company Name (if applicable): \_\_\_\_\_

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

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

Phone: \_\_\_\_\_

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

Type of Sponsorship: \_\_\_\_\_

Total Amount: \$ \_\_\_\_\_ Preferred Reservation Time (circle one): 5:30 p.m. 6 p.m. 6:30 p.m. 7 p.m. 7:30 p.m.

Unfortunately, I am unable to attend but I would like to support the Somerset Health Care Foundation with a gift of \$ \_\_\_\_\_.

Credit Card (circle one):

American Express      VISA      Mastercard      Discover

Name as it appears on Credit Card:

\_\_\_\_\_

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

Credit Card Number: \_\_\_\_\_

Expiration Date: \_\_\_\_\_ CSV: \_\_\_\_\_

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

**Make checks payable to:** Somerset Health Care Foundation.  
Please e-mail to Heather.Vail@rwjbh.org, fax to 908-595-2630  
or mail to: Somerset Health Care Foundation, 110 Rehill Avenue, Somerville, NJ 08876.  
Register online: [rwjbh.org/carpediem](http://rwjbh.org/carpediem)