



Adventureland's Friends & Family V.I.P. Experience
for the benefit of
The Helping Hands Foundation
supporting the
Tony Gentile Memorial Scholarship Fund
September 7, 2018

V.I.P. Reservation

V.I.P. access for 30 guests: _____ x \$ 2500\$ _____

Additional V.I.P.s..... _____ x \$100\$ _____

_____ I cannot attend, enclosed is my donation\$ _____

V.I.P. Night 2018 Sponsorship Opportunities

- | | |
|---|---|
| <input type="checkbox"/> Ride Sponsorship, \$1,000 | <input type="checkbox"/> Hat Sponsorship, \$7,500 |
| <input type="checkbox"/> Game Sponsorship, \$1,000 | <input type="checkbox"/> Photography Sponsorship, \$7,500 |
| <input type="checkbox"/> Cookie Sponsorship, \$1,500 | <input type="checkbox"/> Adventureland Stage Sponsorship, \$7,500 |
| <input type="checkbox"/> Cotton Candy Sponsorship, \$2,500 | <input type="checkbox"/> Ronald McDonald Sponsorship, \$7,500 |
| <input type="checkbox"/> Popcorn Sponsorship, \$2,500 | <input type="checkbox"/> Food Truck Sponsorship, \$10,000 |
| <input type="checkbox"/> Photo Souvenir Sponsorship, \$5,000 | <input type="checkbox"/> Favor/Cooler Sponsorship, \$15,000 |
| <input type="checkbox"/> Hydration Station Sponsorship, \$5,000 | |

Grand Prize Raffle Entries

1 Entry = \$50 3 Entries = \$100 Total Number of Entries: _____

Select how many entries for each prize you would like:

- | | |
|---|---|
| <input type="checkbox"/> 1. Jets NFL Package | <input type="checkbox"/> 6. Concert/Psychic Package |
| <input type="checkbox"/> 2. Summer Jam Package | <input type="checkbox"/> 7. Season Pass Package |
| <input type="checkbox"/> 3. Holiday Light Package | <input type="checkbox"/> 8. Broadway Package |
| <input type="checkbox"/> 4. The Paramount Package | <input type="checkbox"/> 9. Giants Suite Package |
| <input type="checkbox"/> 5. Jets Tailgate Package | <input type="checkbox"/> 10. Splish Splash Package |

TOTAL DONATION...\$ _____



Name: _____

Company: _____

Phone: _____

Address: _____

City/State/Zip: _____

Email: _____

____ Check enclosed made payable to "Adventureland's Helping Hands Foundation"

____ Please charge my: ____ Visa ____ MasterCard ____ Discover ____ Amex

Name on Card: _____

Card #: _____

Expiration Date _____ Security Code _____

Signature: _____

Please return this form with payment in the enclosed envelope or send to:

The Helping Hands Foundation

V.I.P. Event

2245 Broadhollow Road

Farmingdale, NY 11735