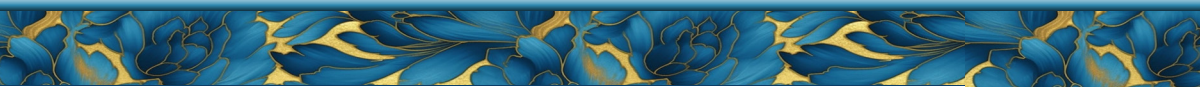




Women's Auxiliary of Mozaic Senior Life

Fall Gala

THURSDAY, OCTOBER 22, 2026



Name _____

Address _____

City/State/Zip _____

Telephone: Home/Cell _____

Email _____

My gift will be made by:

☐ Enclosed check (*payable to the Women's Auxiliary*) ☐ Donor Advised Fund ☐ Stock Transfer

☐ Please charge my credit card \$ _____ ☐ Master Card ☐ Visa ☐ American Express

☐ I would like to increase my donation by 2% to cover the cost of credit card processing fees.

Account # _____

Exp. Date _____ Sec. Code _____ Signature _____

☐ My gift will be matched by my employer's matching gift program.

☐ I am interested in learning more about Mozaic Senior Life's Legacy Giving.

Your gift in excess of the \$200 per person dinner value is deductible as a charitable contribution to The Women's Auxiliary.

QUESTIONS? CONTACT BETH TEPPER AT 203-396-1000 OR BTEPPER@MOZAICSL.ORG

THE WOMEN'S AUXILIARY OF THE JEWISH HOME FOR THE ELDERLY IS A 501(C)(3) NON PROFIT ORGANIZATION. EIN 06-1055236

PLEASE RETURN BY FRIDAY, OCTOBER 2, 2026

Fall Gala

PLEASE RETURN BY FRIDAY, OCTOBER 2, 2026

COMMEMORATIVE JOURNAL AD WITH RESERVATIONS

- | | | |
|--|----------|--|
| ☐ BUILDER | \$25,000 | Includes 12 Reservations and Back Cover Ad |
| ☐ BENEFACTOR..... | \$10,000 | Includes 8 Reservations and Inside Back Cover Ad |
| ☐ PATRON | \$ 5,000 | Includes 6 Reservations and Full Page Ad |
| ☐ PILLAR | \$ 2,500 | Includes 4 Reservations and Full Page Ad |
| ☐ GUARDIAN..... | \$ 1,500 | Includes 2 Reservations and Full Page Ad |

COMMEMORATIVE JOURNAL AD ONLY

- | | | |
|---|----------|-------------------|
| ☐ SUPPORTER | \$ 1,200 | Full Page Ad Only |
| ☐ DONOR | \$ 600 | Half Page Ad |
| ☐ FRIEND..... | \$ 300 | Quarter Page Ad |
| ☐ BUSINESS CARD..... | \$ 200 | Business Card Ad |
| ☐ LISTING | \$ 136 | Name Only |

All ads will be recognized by category in the next issue of Mozaic Senior Life's newsletter, *Chai Lights*.
Check here ☐ if you do not want to be included in the newsletter listing.

Please provide copy for your journal ad below:

Or email camera-ready art as a 300-DPI COLOR PDF or JPG to sfreed@mozaicsl.org by Friday, October 2.
Ad sizes are as follows: Full Page: 7" W x 7.75" H, Half Page: 7" W x 3.5" H, Quarter Page: 3.375" W x 3.5" H

GALA RESERVATIONS ONLY

- ☐ RESERVATION.....\$ 325 Per Person

Please seat me/us with (tables of 8-12) _____

☐ KOSHER MEAL PREFERRED

☐ I/we are unable to attend but wish to make a donation of \$ _____
in honor of ☐ Renée & Ron Noren ☐ Eric Hendlin
or: _____



To register online, please visit:
www.mozaicsl.org/donations/womens-auxiliary-donations/fall-gala/
or scan the QR code.

Please complete payment information on the back panel. →