

Digital Tribute Ad Contract for the  
**Denver Jewish Day School Annual Dinner**



**Wednesday, March 18, 2020**

Grand Hyatt Denver, 1750 Welton Street, Denver CO 80202

**Join us as we honor Jerry Rotenberg,  
and Drs. Stuart Senkfor & Leslie Stewart**

For more information about the dinner, purchasing tickets, placing your ad or making a donation, please visit [www.denverjds.org/giving/ways-to-give/annual-dinner](http://www.denverjds.org/giving/ways-to-give/annual-dinner). Tickets for the event are \$360 per person, \$720 per couple.

Name (Company or Individual): \_\_\_\_\_ Contact Person: \_\_\_\_\_

Address: \_\_\_\_\_ City, State & ZIP: \_\_\_\_\_

Phone: \_\_\_\_\_ Cell: \_\_\_\_\_ Email: \_\_\_\_\_

**Ad Submission Deadline is Friday, March 6, 2020**

Digital Ad Journal Options	Ad Submission Guidelines	Dinner Partners
Diamond Page 13.3" X 7.5" in. \$2,500 Full Page 13.3" X 7.5" in. \$1,000 Half Page 6.5" X 7.5" in. \$360 (Width X Height) ► Tribute journal will be printed for honorees as a special keepsake after the event	Check here if you want to use your ad language from 2019. Please indicate size at left. ► Acceptable electronic file formats in order of preference are: tif, jpg, pdf. ► Ad resolution: 300 dpi	All dinner partnerships include a full-page ad and tickets to attend. Please call for complete benefits at each level.  Title Partner \$50,000 Presenting Partner \$25,000 Mainstage Partner \$15,000 Gold Sponsor \$10,000 Silver Sponsor \$5,000

Submit ads to [mmintzer@denverjds.org](mailto:mmintzer@denverjds.org), fax to (303) 369-0664 or mail to:

Denver Jewish Day School, Attn: Maya Mintzer, 2450 S. Wabash St., Denver, CO 80231-3816.

Ads are tax deductible. Tax ID# 84-1476467. Questions? Contact Maya Mintzer at (720) 449-9549 or [mmintzer@denverjds.org](mailto:mmintzer@denverjds.org).

**Payment Options**

**Check Enclosed:** Please make your check payable to Denver Jewish Day School and mail to the attention of Maya Mintzer at: Denver Jewish Day School, 2450 S. Wabash St., Denver, CO 80231-3816.

**Credit Card:** Visa Mastercard American Express FACTS (current parents)

Name on Card: \_\_\_\_\_ Phone: \_\_\_\_\_

Credit Card Number: \_\_\_\_\_ Exp.: \_\_\_\_\_ CVV: \_\_\_\_\_ Amount: \_\_\_\_\_

Mailing Address of Cardholder: \_\_\_\_\_

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

Ads will not be processed until paid in full.