



North Salem Volunteer Ambulance Corps

14 Daniel Road, North Salem, NY 10560
(914) 277-4944

2016 Winter Gala

Dear Friends and Neighbors:

We will be hosting our fourth annual ***Winter Gala*** on March 12th! We hope you will join us at Starr Ridge Banquet Center for an evening of live entertainment, good food and fun. The evening will kick off at 6 pm with a cocktail hour, followed by a buffet dinner, music and dancing, raffle and a silent auction. Tickets are available for \$85/person.

We are proud to be a ***100% volunteer*** organization that serves the community, 24 hours a day, 7 days a week, 365 days a year...since 1969! Many of your neighbors spend countless hours training and responding to medical emergencies.

In addition to the evening of fun, we will be distributing a journal where local residents and businesses can advertise or simply post a message about their experience with our organization. We have attached a Journal Form (for placing an ad or if you prefer to make a donation). If you would like to make a donation of goods or services for our silent auction or raffle, please contact us at (914) 277-4944 or via e-mail to president@nsvac.org.

A limited number of tickets are available, so purchase your tickets early! Tickets can be purchased on our website at www.nsvac.org. We look forward to an evening of fun and thank you in advance for your continued support!

Sincerely,

Kurt Guldán
President

Maria Hlushko
Captain



North Salem Volunteer Ambulance Corps

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JOURNAL FORM

Ad Pricing:

- Back Cover \$500
- Inside Cover \$300
- Full Page \$100
- Half Page \$75
- Quarter Page \$25

Donor Levels (names will be listed):

- President \$500 and over
- Captain \$300
- Lieutenant \$100
- Other amount \$ _____

Name: _____

Company Name: _____

Address: _____

Phone: _____

E-Mail Address: _____

Deadline: Journal sheet, artwork and payment are due by Tuesday, March 1st.

Ad Copy: Use back of form if necessary or attach additional sheet. Camera ready or electronic.
Please send a self-addressed, stamped envelope for photos that you wish to be returned.

For further information, please call Kurt Guldan at (914) 277-4944 or e-mail president@nsvac.org

Please return this sheet with your contribution (payable to North Salem VAC) to:

North Salem Volunteer Ambulance Corps
PO Box 427, Croton Falls, NY 10519

THANK YOU FOR YOUR DONATION TO THE NORTH SALEM VOLUNTEER AMBULANCE CORPS. *All donations are tax deductible to the extent permitted by law.*



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DONATION CONTRACT

I/We are interested in being an event sponsor to support the North Salem Volunteer Ambulance Corps and its members.

All donations will be announced in the Winter Gala Journal unless otherwise stipulated.

| | | |
|-------|------------|-------|
| _____ | President | \$500 |
| _____ | Captain | \$300 |
| _____ | Lieutenant | \$100 |

Other Item: _____

Name: _____

Address: _____

Phone: _____

E-Mail Address: _____

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