

***"Be an Anchor for Our Students in This World of Shifting Values"***

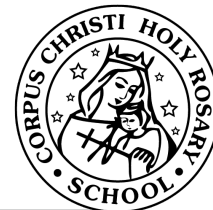
**THE 12TH ANNUAL FATHER PETER M. RINALDI AWARDS GALA**



**SATURDAY, MAY 20, 2023 HONORING HOPE VESPIA**

**TO BENEFIT CORPUS CHRISTI HOLY ROSARY SCHOOL**

**THE SALESIAN ELEMENTARY SCHOOL OF WESTCHESTER COUNTY**



I hereby agree to pay \$\_\_\_\_\_ for the following:

Commemorative Ad Journal Tribute / Memorial Page:

<input type="checkbox"/> Back Cover	(7" x 8½")	\$2,500.00
<input type="checkbox"/> Inside Front/Back Cover	(7" x 8½")	\$2,000.00
<input type="checkbox"/> Platinum Page	(7" x 8½")	\$1,000.00
<input type="checkbox"/> Gold Page	(7" x 8½")	\$ 750.00
<input type="checkbox"/> Silver Page	(7" x 8½")	\$ 500.00
<input type="checkbox"/> Full Page	(7" x 8½")	\$ 200.00
<input type="checkbox"/> Half Page	(7" x 4¼")	\$ 100.00
<input type="checkbox"/> Quarter Page	(3½" x 4¼")	\$ 50.00
<input type="checkbox"/> Cornerstone (20 word message)	(2" x 2")	\$ 25.00

Please print your message / memorial / tribute / advertisement / personal story clearly inside the box on the right. ➡ You may also submit a photograph (which will be returned), illustration, a business card, or a PDF file to this e-mail address: **cchrsdevelopment@gmail.com**.

Honor one or more of the following:

- Hope Vespia
- Father Peter Rinaldi - a memorial tribute ad.
- The Salesian Family of Corpus Christi Holy Rosary School.
- A Salesian alumnus/alumnae or class.
- A friend / family member or Memorial Ad.
- Offer your personal story and/or "thank you" to the Salesian Sisters/ Priests / Brothers or Lay Teachers.

**Deadline: April 17, 2023**

**Please mail this form to: The Father Peter M. Rinaldi Awards Gala, Corpus Christi Holy Rosary School, 135 South Regent Street, Port Chester, NY 10573. You can also e-mail cchrsdevelopment@gmail.com or please call Judi DeSouter: (646) 633-5575.**

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

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

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

Enclosed is: ☐ Check ➡ (Please make check payable to "Friends of Corpus Christi Holy Rosary School") ➡

☐ Discover ☐ MasterCard ☐ VISA ☐ American Express

Card Number: \_\_\_\_\_ Exp. Date: \_\_\_\_/\_\_\_\_ CVC #: \_\_\_\_\_

Signature: \_\_\_\_\_ **ALL PROCEEDS DIRECTLY BENEFIT Corpus Christi Holy Rosary School students!**