

MTA/NJ Christmas Party Reservation Form

December 15, 2022 - 6:30 PM- 10:30 PM

Fill out the registration form below or sign up online at mtanj.org/events.html.

Company Name: _____

Name(s): _____

Phone: _____ Email: _____

Attending @ \$85/person: _____ Amount Enclosed: \$ _____

MENU SELECTIONS

(Please include entrée choice for each person attending.)

_____ Filet of Sole Stuffed with Lobster & Lump Crab, citrus butter sauce and fresh lemon

_____ Herb Roasted French Breast of Chicken in a sherry reduction

_____ Slow Roasted Prime Rib of Beef au jus, with a side of spicy horseradish sauce

Payment (Select One): ☐ Credit Card ☐ Check Enclosed (Make payable to the MTA/NJ)

Business: _____

Contact: _____ Email: _____

To pay via **credit card** please fill out the following information:

Name As It Appears On Card: _____

Card Number: _____ Exp. Date: _____ CVC Code: _____ Billing Zip: _____

Signature: _____

Please RSVP by December 8, 2022.



Complete reservation form & mail copy w/payment or fax to:
413 Euclid Ave. Brielle, NJ 08730
P: (732) 292-1051 F: (732) 292-1041 | mtanj.org | info@mtanj.org

MTA/NJ Annual Christmas Party Sponsorship Opportunities

THURSDAY, DECEMBER 15, 2022
6:30 PM TO 10:30 PM

- | | | |
|--------------------------|--|---|
| <input type="checkbox"/> | Platinum Sponsor
You will receive: | \$600.00 Sponsorship
Signage at the Christmas Party
Four (4) Free Tickets to the Christmas Party
Recognition in MTA/NJ Messages & Social Media |
| <input type="checkbox"/> | Gold Sponsor
You will receive: | \$400.00 Sponsorship
Signage at the Christmas Party
Two (2) Free Tickets to the Christmas Party
Recognition in MTA/NJ Messages & Social Media |
| <input type="checkbox"/> | Silver Sponsor
You will receive: | \$200.00 Sponsorship
Signage at the Christmas Party
A "Thank You" in the Party Program
Recognition in MTA/NJ Messages & Social Media |

Your generous donation is used to cover the additional costs of the event and purchase all of the gifts for everyone in attendance. Thank you for your support!

Payment (Select One): ☐ Credit Card ☐ Check Enclosed (Make payable to the MTA/NJ)

Business: _____

To pay via **credit card** please fill out the following information:

☐ Visa ☐ MasterCard ☐ American Express ☐ Discover

Name As It Appears On Card: _____

Card Number: _____ Exp. Date: _____ CVC Code: _____

Billing Address: _____

Billing City: _____ Billing State: _____ Billing Zip: _____

Signature: _____



To expedite, please fax response to 732-292-1041

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