## **Presenting Sponsors**



Ward Melville Heritage Organization

## Gold Sponsors





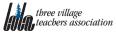


## Silver Sponsors













### **Copper Sponsors**

Apple Bank for Savings **Christopher Gallery** Lombardi's on the Sound Stony Brook University Hospital Auxiliary The Stony Brook School, **Character Before Career** 

## Alumni Sponsors

**Budget Print Center** Bryant Funeral Home Joe & Fran Fazzingo Imagination Pre-School Virginia A. O'Dwyer Real Estate Stony Brook Fire Department

## **Participation**

Special Incentives for Teams!

Everyone is invited to participate in the Walk for Beauty. Join together with family, friends or members of your school and walk as a team. Individual registration fees are waived for those walking as members of a school team bringing in a minimum of \$500, or as part of a business team bringing in a minimum of \$750. Teams consist of a minimum of 10 people, and a maximum of 25.

You will be entered in a special raffle if you raise:

- \$100 as an individual
- \$500 as a school team or a team of family/friends
- · \$750 as a business team

#### Survivors

Cancer survivors are invited to pick up a special survivor's hat at the "Survivors" table.

### Tribute Signs

Purchase a tribute sign at the "Tribute" table on the day of the walk to wear in support or in memory of loved ones affected by cancer.

> To get the facts about cancer, call: Stony Brook University Medical Center's CANCER HELPLINE 1.800.862,2215

### SPONSORSHIP OPPORTUNITIES GOLD - \$5,000 Donation

- Your logo will appear PROMINENTLY on the official Walk for Beauty, Walk for Life T-Shirt.
- Your logo will appear in the program distributed on the day of the Walk.
- · Your logo will appear on the signage appearing on the day of the Walk.
- · Your logo will appear in the 2-page promotional ad in
- the Times Beacon Newspaper. Your company will be able to place an exhibit table at
- the post-walk celebration.
- · Your company name will appear on our Face Book pages

### SILVER - \$2.000 Donation

- Your logo will appear on the official Walk for Beauty. Walk for Life T-Shirt.
- Your logo will appear in the program distributed on the day of the Walk.
- Your logo will appear on the signage appearing on the day of the Walk
- Your logo will appear in the 2-page promotional ad in the Times Beacon Newspaper.
- Your company name will appear on our Face Book pages

### **BRONZE - \$1,000 Donation**

- Your logo will appear on the program distributed on the day of the Walk
- · Your logo will appear on the signage appearing on the day of the Walk
- · Your logo will appear in the 2-page promotional ad in the Times Beacon Newspaper.

#### COPPER - \$500 Donation

- Your name will appear in the program distributed on the day of the Walk.
- · Your name will appear in the 2-page promotional ad in the Times Beacon Newspaper

### CONTRIBUTIONS: \$100 - \$499 Donation

• Your name will appear in the program distributed on the day of the Walk.

ATTACH THIS FORM TO YOUR CONTRIBUTION

Name Company \_\_\_\_\_ City \_\_\_\_\_State\_\_\_Zip\_\_\_\_ Tel. (H) \_\_\_\_\_\_(W) \_\_\_\_\_ E-mail address

Please make checks payable to the Walk for Beauty Fund. Walk for Beauty Fund, c/o Stony Brook University Medical Center, Department of Community Relations 45 Research Way, Suite 204, East Setauket, NY 11733

Department of Community Relations Story Brook University Medical Center 45 Research Way, Suite 204 E. Setauket, NY 11733



Walk for Beauty, Walk for Life began in 1994 as a community effort to raise awareness about breast cancer and to establish a boutique for people with cancer. The Unique Boutique, a collection of shopkeepers who provide products and services for patients with cancer, and The Walk for Beauty Fund enable patients with cancer to purchase wigs, prostheses and other special products. Since 1996, the Walk for Beauty has supported breast cancer research at Stony Brook University (SBU). In 2002, the Walk broadened its scope to include prostate cancer. Proceeds from the 2009 Walk for Beauty, Walk for Life will support breast and prostate cancer research at Stony Brook University. All proceeds go directly to research, never to administrative fees. Nothing is deducted for administrative costs. Donations are fully tax deductible.

### **How It Works**

Walkers collect donations from family, friends and co-workers. All donations are submitted at registration on the day of the Walk. See registration form for pre-registration information.

### When & Where

This yearís Walk for Beauty (4K/6K) will be held in beautiful and historic Stony Brook on **Sunday**, **October 4th**, **2009** with the start line at the Stony Brook Post Office.



Stony Brook Village Center Walk Route

The 6K walkers have the option of walking throughAvalon Park and Preserve.

# Parking

Please park in South-P Lot on the campus of Stony Brook University, just minutes from the **Walk** start-line. Shuttle buses will run continuously between P-Lot and Stony Brook Village Center. (**See map below.**)

## Express Check-In

Parking in P-Lot will enable you to take advantage of the express registration area located there. Once you arrive at the Stony Brook Village Center, you'll be registered and ready to walk!



#### DIRECTIONS TO P-LOT

25A From the east. Turn left at Nicolls Road. At the 3rd traffic light, turn right onto the Stony Brook "South" campus. Follow signs on South Drive to P-Lot, which will be on the left.

**25A From the west.** Turn right at Stony Brook Road. At the first traffic light, turn left onto Stony Brook "South" campus. P-Lot is directly on the right.

From the LI Expressway (495). Take Exit 62 (Rt. 97, Nicolls Road). Go north on Nicolls Road (about 9 miles). Turn left at the first entrance for the Stony Brook campus. This is South Drive. Follow the road signs to P-Lot which will be on the left.

For assistance with directions, call 631.444.4000.

## WALKER SPONSOR SHEET



All walkers must register to participate. Collect the donations from your sponsors using this form. Your donation is fully tax deductible. Sponsors convert cash to a check. Please make checks payable to the **Walk for Beauty Fund** and bring your donations with you to the registration table or mail in advance to:

Walk for Beauty Fund, c/o Stony Brook University Medical Center, Community Relations Department, 45 Research Way, Suite 204, E. Setauket, NY 11733

Jame of Walker	of Walker Team Name				
Company Name and Departme	ent				
Address					
y/State/ZipPhone					
Sponsors: Pay only by check to the Walk For Beauty Fund					
Sponsor Name	Address (Street, City, State, Zip)	Contribution			
1					
2					
3					
4					
5					
7					
8					
9					
10					
11					
12					
13					
14					
15					
16					
ATTACH THIS FORM TO YOUR CONTRIBUTIONS  More Sponsors? Please use plain paper and attach.					

Contributions are fully tax deductible. For more information call: 631.444.4000.

# REGISTRATION FORM

Must be filled out for each walker.

Donation

• Individuals: \$20

I cannot walk but here is my \$\_\_\_\_ donation.

 Pre-Registration Bonus

Walkers who register by 9/19 will receive a \$5 savings off the registration fee. To pre-register please mail the completed registration form and

(\$15 Minimum) made payable to: Walk for Beauty Fund

c/o Stony Brook University Medical Center Department of Community Relations 45 Research Way, Suite 204, E. Setauket, NY

T-Shirts

Registered walkers will receive a Walk for Beauty, Walk for Life T-Shirt while supplies last. On the day of the Walk there will be a special table where you may pick up T-shirts. Pre-registration forms must be post-marked no later than September 19. To confirm registration please provide e-mail address below or call 631.444.5250.

Pl	TE A	CE	PD	INT	

Team Name	
Company and Dept	
Address	
City	
	Zip
Tel. (H)	(W)
E-mail address	

In signing this form for myself (or participant below if he or she is under 18), Lundestand and larger to absolve Story Brook University Medical Center and all sponsors, be they individuals or organizations, individually or collectively, of all blame for any injury, misadventure, harm, loss or inconvenience suffered in any of the activities associated with the said event. I grant full permission for organizers to use my name, likeness, or vicice and photographs, videotapes or quotations from me in accounts and promotions in any medium for this event.

SIGNATURE OF PARTICIPANT

Name of adult with minor

Age if minor

SIGNATURE OF PARENT (if participant is under 18)