



**Solomon Schechter Day School of Nassau County
Solomon Schechter High School of Long Island**



**Tuition Reduction Opportunity
2009-2010/5770 Academic Year**

- Earn a credit towards your tuition obligation for the 2009-2010/5770 academic year equal to 50% of all new advertisements* that you solicit on behalf of the School before May 15, 2009 or applicable print deadline.
- Maximum credit can be up to your **total tuition** obligation.

Advertisements can be sold for the May Gala Journal, Annual School Calendar, 2009-2010 School Directory Yellow Pages. The following prices are based on advertisements in all three venues.

- Business Card Ad.....\$ 360**
(Individual Ad prices: Journal: \$250, Directory \$180, Calendar Equivalent \$100)
- Half Page Ad.....\$1,000**
(Individual Ad prices: Journal: \$500, Directory \$360, Calendar Equivalent \$250)
- Full Page Ad.....\$1,800**
(Individual Ad prices: Journal: \$1,000, Directory \$1,000, Calendar Equivalent \$1,000)
- Single Sponsorship.....\$5,000**
- Two Sponsorships\$7,500**
- Three Sponsorships.....\$10,000**

Please contact Ruth Deane for information at 516-622-1187 or rrgnjd@hotmail.com

*New Advertisements are defined as:

- Advertisements emanating from any person, family, business or organization that has never donated to the school or paid for advertising with the school in the past, or
- Advertisements from previous contributors and/or advertisers:
 - Where the advertisement exceeds their largest annual campaign gift or advertisement since 2005, in which case 50% of the increase is eligible for the discount; or,
 - Who have not made a contribution or placed an advertisement since 2005.

The IRS requires that we file Form 1099 in the amount applied to your tuition, therefore, you must provide your Social Security number to participate in the program. It is understood that you will be responsible for any tax burden on the percentage of income contributed toward your child(ren)'s tuition.



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Ad Form

- Business Card Ad.....\$ 360
- Half Page Ad.....\$ 1,000
- Full Page Ad.....\$1,800

Ad Copy: (You may also send copy or business card on a separate sheet.)

Ad Solicited By: _____

Name of Business _____

Address: _____

Phone Number: _____

E-mail address: _____

Payment:

By Check:

Checks should be made payable to **SSDS** and mailed to:
SSDS Development Office
27 Cedar Swamp Road, Glen Cove, NY 11542

Credit Card:

If you wish to pay with a credit card, check one: Visa Mastercard American Express

Name on Card _____

Credit Card Number _____

Expiration Date _____ Billing Zip Code _____

Address _____



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**Tuition Reduction Advertisement Tracking Form
2009-2010/5770 Academic Year**

I wish to take advantage of the Tuition Reduction Opportunity

Name: _____ Date ____/____/____

Tuition Advantage for name(s) of child(ren): _____

Address: _____

Phone Number: _____ E-mail address: _____

Social Security Number _____

Ads Sold:

Ad 1: Name of Business _____ Date of Sale ____/____/____ Amount _____

Ad 2: Name of Business _____ Date of Sale ____/____/____ Amount _____

Ad 3: Name of Business _____ Date of Sale ____/____/____ Amount _____

Ad 4: Name of Business _____ Date of Sale ____/____/____ Amount _____

Ad 5: Name of Business _____ Date of Sale ____/____/____ Amount _____

Ad 6: Name of Business _____ Date of Sale ____/____/____ Amount _____

Ad 7: Name of Business _____ Date of Sale ____/____/____ Amount _____

Ad 8: Name of Business _____ Date of Sale ____/____/____ Amount _____

Ad 9: Name of Business _____ Date of Sale ____/____/____ Amount _____

Ad 10: Name of Business _____ Date of Sale ____/____/____ Amount _____

Total Amount Sold: _____

For Office Use Only

Initials _____ Date Entered ____/____/____