



BOYS & GIRLS CLUB
OF CAMDEN COUNTY

Annual Susan K. Asbell Sponsor A Child Kickoff
Monday, November 15, 2021 at 6:00pm

At *the* **CHOPHOUSE**

4 Lakeview Drive S., Gibbsboro, NJ 08026



Susan K. Asbell with Club member

Event Sponsor



AMERICAN WATER

Please bring a **\$25 Shop Rite gift card** to be donated to a Club Family for a turkey or ham for Thanksgiving.

3 Course Reception for \$125

Cold Appetizers

(Mezze Plate, Seasonal Fruit, Tomato Crostini)

Salad

(choice of: Baby Greens, Classic Caesar or ChopHouse Salad)

Hot Stations

Tournedos, Calamari, Mediterranean Chicken, Chicken Parmigiana, Chicken Marsala, Penne or Cavatappi Pasta)

(Includes one drink. Please be generous when leaving your tip)

If you are unable to attend, please consider making a donation, put **"SAC"** in the notes field. Thank you.

www.BeGreatCamden.org/donate

Donate



THE SUSAN K. ASBELL  FUND
sponsor a child
HELP A CHILD GROW AT THE BOYS & GIRLS CLUB

the **CHOPHOUSE**



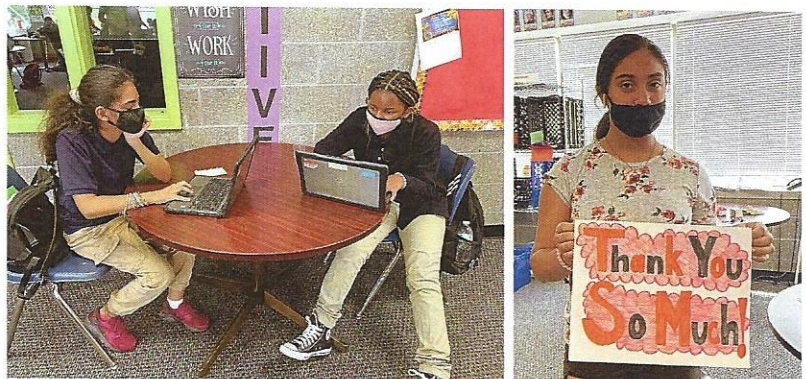
RSVP required: Contact Sabine
sabine@bandgccc.org

Phone: 856-602-4130

Website: www.BeGreatCamden.org

Social: @BGCCamden   

2 North Dudley St., Camden, NJ 08105



Proceeds will be designated for programs and activities at the Club.



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OF CAMDEN COUNTY

Event Sponsor



AMERICAN WATER



THE SUSAN K. ASBELL
sponsor a child FUND
HELP A CHILD GROW AT THE BOYS & GIRLS CLUB



Join us for the Susan K. Asbell **Sponsor A Child Kickoff**
on Monday, **November 15, 2021** at 6:00pm at **the CHOPHOUSE**

Please bring \$25 Shop Rite gift card, to be donated to a Club family to buy a turkey or ham for Thanksgiving. Thank you!

Reception for \$125 per person, (one drink included, please be generous & leave a tip).

Name: _____
Address: _____
City: _____
State: _____ Zip: _____ Country: _____
Telephone: _____ Email: _____

Please Indicate:

- \$125 Each X _____ # People
- \$1250 Group of 10
- \$_____ other
- \$_____ Donation

Total \$ _____

in party _____



Payment Information:

I have enclosed a check payable to Boys & Girls Club of Camden County. I would like to make my donation by credit card.

Name (on card): _____
Credit Card Number: _____ Card Type: _____
Exp. Date (MM/YYYY): _____ CVC: _____
Billing Address: _____
City/State/Zip/Country: _____
Cardholder Signature: _____ Date: _____

*By signing this form, I authorize the debit of my credit card to **Boys & Girls Club of Camden County** for the set amount indicated above.*

Information filed with the Attorney General concerning this charitable solicitation may be obtained from the Attorney General of the state of New Jersey by calling 973-504-6215. Registration with the Attorney General does not imply endorsement. Proceeds will support Programs and services at the Boys & Girls Club of Camden County.

Please submit this completed form to:
Boys & Girls Club of Camden County
2 North Dudley Street, Camden, NJ, 08105
Sabine Mehnert-Roehm
Email: sabine@bandgccc.org
Pay Online: www.BeGreatCamden.org/donate