



***MEDICAL SOCIETY OF THE COUNTY OF KINGS, INC.,
THE ACADEMY OF MEDICINE OF BROOKLYN***

and

THE RICHMOND COUNTY MEDICAL SOCIETY

**Cordially invite you to attend
Doctors' Recognition Day
Honoring
Brooklyn and Staten Island's
Best Doctors**



on

Tuesday, March 26, 2019

***Please join us in celebration, along with the physician community,
hospital and specialty society leadership and elected officials at:***

Rex Manor
1100 60th Street, Brooklyn, NY 11219
Between 59th & 60th Streets on 11th Avenue
(718) 854-3232

Members: \$100.00
Non-Members: \$125.00
Resident's & Medical Students: \$35.00
Table of 10: \$1,000.00

Cocktail Reception & Expo: 6:00 p.m.
Dinner and Awards Program: 7:00 p.m. – 10:00p.m.
See Registration form for Exhibitor and Journal Ad Rates

(Cancellations not received by 3/22/19 will be billed the full amount)

Please R.S.V.P. by Wednesday, March 20, 2019
Academy of Medicine of Brooklyn
480 77th Street, Brooklyn, New York 11209
(718) 745-5800 x12, Liz Harrison
(718) 745-5833 Fax

Executive Committee Chairs:

Lee E. Loewinger, MD and Simon G. Kokkinakis, MD

2019 DOCTOR'S RECOGNITION DAY

Registration Form

(R.S.V.P. by Wednesday, March 20, 2019)

DATE: Tuesday, March 26, 2019

PLACE: The Rex Manor, 1100 60th Street, Brooklyn, NY 11219

Participant Information (Please Print)

First Name _____ Last Name _____

Company/Affiliation _____ Title _____

Address _____ Address 2 _____

City _____ State _____ Zip _____

Phone _____ Mobile Number _____ Fax _____

Email address _____

Dinner Tickets: \$100 members / \$125 non-members / \$35 Residents/Students / \$1,000 Tables of 10

**Please make check payable to the
ACADEMY OF MEDICINE OF BROOKLYN
and mail to 480 77th Street, Brooklyn, NY 11209
Phone: (718) 745-5800 / Fax: (718) 745-5833**

NAMES OF GUESTS (Print or Type)

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.....
.....
.....
.....

 Please inform us of any special needs: (i.e., physical, dietary):

I would like to request number of Kosher dinners

For Kosher Only: Meat, Chicken, Fish, Vegetarian

Exhibitor and Journal Advertising Rates / Size 7" x 10"

Vendor Table Display \$1,500 (incl. 2 dinner tickets plus logo displayed on journal Thank You page)
Exhibit at a second Kings County event in 2019 = \$1,000 / Third event with Kings County in 2019 = \$900

	<u>Please indicate size</u>	<u>Rates</u>	
	..... Outside Back Cover	\$1,000	
JOURNAL ADS	..... Inside Covers - Front or Back	\$750	Submit ads as
<u>DUE by 3/14/19</u>	..... Full Page: Gold	\$500	MS Word,
	..... Full Page: Color	\$400	PDF or JPEG
	..... Full Page: Black & White	\$300	
	..... Half Page	\$200	
	..... Quarter Page	\$100	

Enclosed is a check in the amount of \$.....for the ad space and/or dinner reservations (see attached to make payment by credit card.

PLEASE ENCLOSE ADVERTISING COPY WITH YOUR CHECK OR EMAIL AD TO LIZ@MSCK.ORG



**ACADEMY OF MEDICINE OF BROOKLYN
MEDICAL SOCIETY OF THE COUNTY OF KINGS, INC.**

480 77TH STREET, BROOKLYN, NEW YORK 11209

PH: (718) 745-5800 • FAX: (718) 745-5833 • EMAIL: LIZ@MSCK.ORG

VISIT US ON THE WEB AT WWW.MSCK.ORG



Credit Card Transaction Form



Enter the Information for this transaction. Note that all fields with an asterisk (*) are required.

2019 Doctors' Recognition Day

Account Number:
Expiration Date(MMY): *
Amount: *
CVC2: *
Description:

Billing Address

Company:
First Name:
Last name:
Address1: *
Address2:
City:
State/Province:
Zip Code: *
Country: *
Phone:
Email Address: (necessary for receipt)

Please type or handwrite and return the completed form to Liz Harrison at Liz@msck.org or via fax at 718-745-5833. **Make checks payable to The Academy of Medicine of Brooklyn.**

Any questions, please call 718-745-5800 x 12.