



## Business Partner Membership 2019

The Association for Healthcare Foodservice New Jersey Chapter (Formerly known as the Greater NJ Society for Healthcare Food Service Administrators) prides itself on having long standing relationships with our vendor partners. Without their/your financial support it would not be possible for us to provide exceptional educational and networking opportunities to our members. Through your partnership, we are able to subsidize these educational events, networking programs as well as our annual November seminar and signature employee recognition dinner.

As a vendor partner, sponsorship entitles you to benefits as follows:

- One AHF-NJ Annual membership for your business for a one-year term for two persons from your company
- An invitation to all AHF-NJ events for two persons from your company
- One Vendor Exhibition Table at the Annual AHF-NJ Education conference held in November (\$795 value).
- Recognition on the printed brochure detailing the specific program & Registration information for the Annual Education conference
- Advertisement on the website: [www.ahfnj.com](http://www.ahfnj.com) with a direct link to your business site
- Attendance at the Annual Employee Recognition Program to celebrate National Healthcare Food Service Week held in October (for two members of your company, \$160 value)
- Recognition on the various marketing tools to promote the Annual Employee Recognition Program
- Unlimited opportunities to network with the Food and Nutrition Directors of New Jersey and other Professionals to advance the HealthCare/Hospitality Food Service industry.

You will find that the lasting business relationships you will form with our members to be invaluable. It is through our shared aspirations that make us leaders in the business of healthcare food service.

Annual Membership Fee: \$1500

We are moving to a calendar year renewal. Starting in 2020, renewals will be due in January.

For 2019, your prorated amount is           

Payment can be made through our website [www.ahfnj.com](http://www.ahfnj.com) via PayPal.

***If paying by check VERY IMPORTANT TO NOTE: make payable to AHF-NJ... please contact Jessica or Sharon for more information***

If you prefer to use the U.S Mail, please mail payments to:

Jessica Phillips  
28 Mendham Ave  
Morristown, NJ 07960

Questions can be referred to Sharon Sachenski, MA, RDN, Membership Chairperson at 908.209.3935 or myself.

Sincerely,

Heather Duffy , 2019 President

## **Business Partner Membership Application:**

Business Name:

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Company website address:

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Primary Contact: \_\_\_\_\_

First name: \_\_\_\_\_

Middle initial: \_\_\_\_\_

Last name: \_\_\_\_\_

Title: \_\_\_\_\_

Mailing  
address: \_\_\_\_\_

Street or PO Box: \_\_\_\_\_

Suite / Floor / Room #: \_\_\_\_\_

City: \_\_\_\_\_

State: \_\_\_\_\_

Zip Code: \_\_\_\_\_

Cell Phone or Other: \_\_\_\_\_

Email Address #1: \_\_\_\_\_

Email Address #2: \_\_\_\_\_

The Board of Directors will review all new applications and make the final approval.