



DAUGHTERS OF MIRIAM CENTER  
THE GALLEN INSTITUTE  
3 1 s t A N N U A L

STEIGER GOLF  
CLASSIC

PREAKNESS HILLS COUNTRY CLUB  
1050 RATZER ROAD, WAYNE, NEW JERSEY

Monday, August 22, 2011

Remembering Steve Wener

events of the day

- CHECK IN 10:00 A.M.
- BRUNCH 10:15 A.M. TO 12:00 P.M.
- SHOTGUN TEE OFF 12:30 P.M.

Registration Upon Arrival

- **MILLION DOLLAR SHOOTOUT**
- AWARDS DINNER • OPEN BAR

COMMITTEE

ALEX FLEYSHER  
MORTY KLEIN  
JOEL J. STEIGER  
Co-Chairmen

PAUL H. ABRAMS  
MICHAEL BIRNBERG  
ROBERT CHESTNOV  
WILLIAM COHEN  
REID FADER  
ROBERT FOSTER  
MICHAEL GOLDMAN  
GARY KALTER  
ANDREW KANTOR  
ROBERT KANTOR  
DAVID KESSLER

PAUL KRAMER  
MILES LAZERWITZ  
HARRY MORTKOWITZ  
PAT M. MUCCI, JR.  
JAY OPPER  
MELVIN OPPER  
LEONARD ROSEN  
RICHARD ROSENBLUM  
AVI SAFER  
CHARLES SHULMAN  
ANDREW SILVERMAN

JOSEPH M. SILVERMAN  
MICHAEL SIROTA  
ANDREW STEIGER  
DAVID L. STEIGER  
MORRIS YAMNER

GOLF REGISTRATION

Please PRINT the information below and return with your credit card information or check made payable to *Daughters of Miriam Foundation* by **MONDAY, AUGUST 1<sup>ST</sup>** and mail to Marketing & Development Office c/o Daughters of Miriam Center, 155 Hazel Street, Clifton, NJ 07011

Name: \_\_\_\_\_ Day Phone: \_\_\_\_\_

Address: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ Evening Phone: \_\_\_\_\_

Handicap: \_\_\_\_\_ Email: \_\_\_\_\_

Yes, I will play golf and enjoy brunch and dinner for \$600.

Please put me in a foursome with the group indicated on the reverse.  Please assign me to a foursome. Number of participants \_\_\_\_\_

I will sponsor a VIP hole for \$150. My VIP sign should read: Compliments of \_\_\_\_\_

I will buy \_\_\_\_\_ raffles at \$150 each.

I will sponsor a golf cart at \$250. My Golf Cart sign should read: Compliments of \_\_\_\_\_

Yes, I will be a corporate sponsor.  \$10,000  \$7,500  \$5,000  \$2,500

Please list me in the **Remembering Steve Wener** page in the golf catalog for \$500.

Sorry I cannot attend. Enclosed is my contribution of \$ \_\_\_\_\_

Enclosed is my check in the amount of: \$ \_\_\_\_\_ Please charge my  MasterCard  Visa in the amount of \$ \_\_\_\_\_

Card # \_\_\_\_\_ Exp. Date: \_\_\_\_\_ Signature: \_\_\_\_\_

Subscription: \$600 per person (tax deductible amount \$300). For further information call (973) 253-5281 or visit our website [www.daughtersofmiriamcenter.org](http://www.daughtersofmiriamcenter.org)

Name: \_\_\_\_\_ Day Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_ Address: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ Evening Phone: \_\_\_\_\_ Handicap: \_\_\_\_\_ Email: \_\_\_\_\_

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[www.daughtersofmiriamcenter.org](http://www.daughtersofmiriamcenter.org)

The Center's mission is to provide quality health care services and housing for seniors in an environment which enhances and respects individualized traditions and lifestyles. We work to meet the emerging needs in our community and to advance geriatric care through research.

Founded in 1921, the Center is a non-profit, non-sectarian organization licensed by the New Jersey Department of Health, accredited by the Joint Commission on Accreditation of Healthcare Organizations and serves as a university-affiliated teaching center.

Daughters of Miriam Center/The Gallen Institute is a state-of-the-art long-term care and subacute facility providing broad-based services to seniors. Emphasizing a continuum of care focus, Center divisions include a skilled nursing facility, a subacute care wing, an accredited dementia unit, a rehabilitation program, a medical day center with a dementia program, a sheltered work-shop, hospice care, a respite program, and senior housing with supportive services.

**Daughters of Miriam Center  
The Gallen Institute**  
*Celebrating over 90 years of providing health  
and social services to seniors.*



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