



Day  **Haven**
ADULT DAY SERVICES

Neighborhood of Caring Breakfast
November 8, 2018



Day Haven Adult Day Services is a social model adult day services program with centers in Port Jefferson, Ronkonkoma, and Riverhead, NY. We are committed to maintaining quality of life for frail older adults, people with Alzheimer's or a related dementia, and their family caregivers. We accomplish this by providing high quality adult day services and through caregiver education and support.

400 Sheep Pasture Road, Port Jefferson, NY 11777
(631) 476-9698

2210 Smithtown Avenue, Ronkonkoma, NY 11779
(631) 585-2020

165 Columbus Avenue, Riverhead, NY 11901
(631) 807-1720

www.dayhaven.org
dayhavenlongisland@yahoo.com



Day Haven's Neighborhood of Caring Breakfast is an annual event honoring individuals and organizations in our community who help support quality of life for frail older adults, those with Alzheimer's, and their family caregivers.

About the Artist

George was born and raised in Queens, NY but spent long summers upstate on his grandfather's farm where he fed and cared for chickens and cows. George and his wife have a wonderful family with five children and 12 grandchildren. While at Day Haven, George loves to spend time in the art room. The invitation cover, entitled *Girl in a Red Chair* was a special gift from George to his granddaughter. In addition to his newfound art abilities, George enjoys crossword puzzles, trivia, and card games.



*Neighborhood of Caring Breakfast, November 8, 2018
Please RSVP by October 22, 2018*

Name (please print) _____ E-mail _____

Phone _____ Organization _____

Mailing Address _____ City _____ State _____ Zip _____

___ I wish to be a sponsor of the celebration with a listing on the Scroll of Honor as indicated below:

___ Presenting Sponsor	\$5000 (Includes 20 seats*)	___ Donor	\$250 (Includes 2 seats)
___ Champion	\$2500 (Includes 20 seats*)	___ Friend	\$100
___ Advocate	\$1000 (Includes 10 seats*)		
___ Patron	\$ 500 (Includes 4 seats*)		*Includes additional benefits. Call for details.

How would you like your name to appear on the Scroll of Honor? _____

___ I wish to reserve _____ seat (s) at \$55 per person

___ I have enclosed my check made payable to Day Haven in the amount of \$ _____ or

___ Please charge my ___Mastercard ___Visa in the amount of \$ _____

Account No. _____ Expiration Date _____

Name on Card _____ Signature _____

Billing Address _____ Town _____ State _____ Zip _____

Please note, your credit card statement will reflect a charge to Community Program Centers of Long Island, Inc. of which Day Haven is a division. Contributions are tax deductible to the extent permitted by law.
For more information, call (631) 585-2020 x261.

Place
your
stamp
here



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Ronkonkoma, NY 11779