

# SPONSOR CONTRIBUTION OPTIONS

## MOUNTAIN REGION SPEECH & HEARING / SERTOMA CLUB 2017 GOLF TOURNAMENT

**Major Sponsors (\$500 or more)** - For contributions with a total value of \$500 or more, you receive:

- 1) Prominent display of your company's banner at the golf course during the tournament.
- 2) Special acknowledgements of your company in the Tournament Program and in the Times-News "Thank You" ad.

**Hole Sponsor (\$200 or more)** - For contributions with a total value of \$200 you receive:

- 1) Display of your company's name on a sign at a tee box for a hole during the tournament.
- 2) Display of your company's name in the Tournament Program and the Times-News "Thank You" ad.

**All Sponsors (any amount)** - All contributors will receive:

- 1) Display of your company's name in the Tournament Program and the Times-News "Thank You" ad.

### Prize Contribution Sponsors

Non-cash merchandise and gift certificates received will be used as tournament player prizes, or door prizes. Items in sets of 4 may be used as flight prizes & 130-count items can be used for golfer's gift bags.

### Team Sponsors

You may sponsor one or more 4-person teams to play in the tournament on May 20, 2017. Fees are \$80/player (\$320/team). Please indicate the name and telephone number of the team captain(s):

Team captain	Phone #

If you want to play and be assigned to a team, please fill in your name: \_\_\_\_\_

**Contributions** - Please specify your contribution elections and \$ values below. All contributions are tax deductible.

Cash contribution amount	\$
Team sponsorships/registrations at \$320 per team	\$
Individual player registrations at \$80 per person	\$
<b>TOTAL AMOUNT ENCLOSED</b>	<b>\$</b>

**List Merchandise/gift certificates contributed below.** For pickup of items, call your contact person or Mountain Region Speech & Hearing Center at 423-246-4600.

Description	Estimated Value \$
Description	Estimated Value \$

Make checks payable to the **Sertoma Club of Kingsport**. Receipts for contributions will be sent after the tournament. Mail this form to:

**Mountain Region Speech & Hearing Center, 301 Louis Street, Suite 101, Kingsport, TN 37660.**

Your name \_\_\_\_\_ Phone # (\_\_\_\_\_) \_\_\_\_\_ Date \_\_\_\_\_

THANK YOU!