

## 26<sup>th</sup>ANNUAL SWING FORE SIGHT GOLF TOURNAMENT

Monday, July 13, 2020

Lake Forest Country Club, 100 Lake Forest Drive, Hudson

Registration-10:30 a.m. Lunch Buffet-11:30 a.m. – 1:00 p.m. Shotgun Start- 1:00 p.m. 6:00 Cocktails, Dinner Buffet

Sign up now & guarantee a spot! Pre-event contests, Sideboard, 18-Hole Shotgun, Raffle

REGISTRATION	<b>.</b>		
Contact Name:		Company:	
Company Address:			Phone:
E-mail:		Fax:	

## **GOLF SPONSORSHIP LEVELS:**

eight (8) sleeves of Titleist F education (up to 3 hours), a Silver \$2,400 (\$1,500 is 4 sleeves of Titleist Pro V1 g Bronze \$1,300 (\$874 is sleeves of Titleist Pro V1 go Individual Golfer \$550 (	Pro V1 golf balls, marketing info and exposure on PBO website. tax-deductible): Team of four golf balls, marketing informatic tax-deductible): Team of two ( If balls, recognition in program \$345 is tax-deductible): One (1 cognition in program / awards	l) golfer, lunch and dinner, one (1) coupon book, one (1) golf towel, 1 sleeve of
NON-GOLF SPONSORSHIP I		
		nderwriting, company banner at registration (provided by company), recognition
in program/awards ceremo	ny.	
		e): Company name and logo on beverage tickets, recognition on beverage carts or
stations, recognition in prog		
		go on golf balls, recognition in program/awards ceremony.
		logo on golf towels, recognition in program/awards ceremony.
		company logo in the coupon book, recognition in program/awards ceremony.
	tax-deductible): Company nan	ne and logo on ticket in the coupon book, recognition in program/awards
ceremony.		
		ion on contest hole, company name and logo on contest ticket in the coupon
book, recognition in progra		gnition on contest hole, company name and logo on contest ticket in the coupon
	m/awards ceremony. (Two spo	
		on tee box; Sponsor invited to provide volunteer at hole to share Sponsor's
marketing materials.	is tax-deductible). The sign	on tee box, sponsor invited to provide volunteer at hole to share sponsor s
	ount \$ (100% is	s tax-deductible)
	(2007)	
Sponsorship Level:		Form of Payment:
Gold	🗌 Lunch	Invoice my company in the amount of \$
Silver	Beverage Cart / Station	Check enclosed, made payable to Prevent Blindness, Ohio Affiliate
Bronze	Golf Ball	Charge my VISA, MC, AMEX, DISCOVER
🗌 Individual Golfer	Golf Towel	Total Amount:
	Coupon Book	Account #:
	🗌 Mulligan	Billing Street Address / Zip Code:
	Blindfold Putting	
	Closest to the Pin	Expiration Date:
	Hole Sponsor	Signature:
_	Dinner Only	

I would like to add a foursome to a non-golf sponsorship

Please return this form to Darcy Downie to reserve your spot: Prevent Blindness, Hillcrest Medical Bldg. #1, 6803 Mayfield Rd., Suite 111, Cleveland, Ohio 44124/ Email: darcyd@pbohio.org/Phone: 440.720.1285 x. 401.