

SPONSORSHIP OPPORTUNITIES
FOR BIRDIES FOR BLUE

BIRDIES FOR BLUE CHARITY GOLF TOURNAMENT

■ Thursday, September 30, 2021 ■ High Meadow Ranch Golf Club

 TITLE SPONSOR - \$10,000

- Four Golf Teams (16 Players) and 64 Mulligans
- Four Hole Sponsorships
- Cart Sponsorship (logo on Cart Cards)
- Company Spotlight at event
- Logo on advertisements and event banner
- Social media recognition

 SILVER SPONSOR - \$5,000 (4 Available)

- Two Golf Teams (8 Players) and 32 Mulligans
- Two Hole Sponsorships
- Company listed as sponsor in booklet
- Premier seating at Dining Events
- Logo on advertisements and event banner
- Social media recognition

2 LEFT!

 GOLD SPONSOR - \$7,500 (2 Available)

- Three Golf Teams (12 Players) and 48 Mulligans
- Three Hole Sponsorships
- Minor Company spotlight at event
- Cart Sponsorship (logo on Cart Cards)
- Logo on advertisements and event banner
- Social media recognition

 BRONZE SPONSOR - \$2,500 (6 Available)

- One Golf Team (4 Players) and 16 Mulligans
- One Hole Sponsorship
- Company listed as sponsor in booklet
- Priority seating at Dining Events
- Logo on advertisements and event banner
- Social media recognition

1 LEFT!

 Dinner Sponsor - \$2,000 All Par 3's Sponsor - \$1,500 Awards Sponsor - \$1,500 Drinks Sponsor - \$1,500 ~~Lunch Sponsor - \$1,000~~ SOLD Gift Sponsor - \$1,000 Snack Sponsor - \$500 ~~Beverage Cart Sponsor - \$500~~ SOLD Photography Sponsor - \$500 ~~Hole in One Sponsor - \$500~~ SOLD T-Shirt Sponsor - \$2500 Hole Sponsor - \$150 Hole Sponsor - 2 for \$250 ~~Long Drive Sponsor - \$250~~ SOLD ~~Super Raffle Sponsor - \$300~~ SOLD ~~Putting Green Sponsor - \$250~~ SOLD

I am unable to attend but would like to support TOMAGWA with a gift of: \$ _____

PAYMENT/ REGISTRATION INFORMATION

Name/ Primary Contact: _____

Organization Name: _____

Email: _____ Phone: _____

Address: _____

 Check enclosed made payable to TOMAGWA HealthCare Ministries. Please charge my credit card in the amount of \$ _____ VISA AMEX Master Card Discover

Name on Card: _____ Card Number: _____

Exp. Date: _____ CVC: _____ Zip Code: _____

Signature: _____