

SPONSORSHIP

Grand Sponsor \$3,500

- Two foursomes of Golf
- Name on Schroeder Memorial Wall
- Banner with your name in the function room
- 2 Hole Signs
- 20 auction raffle tickets
- Distribution of company promotional items in welcome bags
- Verbal recognition before and after tournament
- Full Page Ad in three issues of the Athletic Magazine

Hospitality Sponsor \$2,500 each

- Dinner Sponsor
- Lunch Sponsor
- Cocktail Sponsor
- One foursome of Golf
- Name on Schroeder Memorial Wall
- Banner with your name in the function room
- Hole sign
- 10 auction raffle tickets

Golf Cart Sponsor \$2,000 each

- Name on all golf carts
- 1 foursome of Golf
- Hole sign
- 10 auction raffle tickets

Corporate Sponsor \$1,000

- One foursome of Golf
- Hole sign

Individual Golfer

- \$200 per person

ADDITIONAL SPONSORSHIPS

Beverage Cart Sponsor \$1,000

- Name on beverage carts
- Recognition before and after tournament
- Distribution of company promotional items in welcome bag
- Hole sign

Birdie Sponsors \$500 (select one)

- Prizes for Golfers sponsor
- Raffle Basket sponsor
- Name in function room

Hole Sponsor \$250

- Hole sign

Archbishop McCarthy



6th Annual Golf Classic

Friday, January 24, 2020

Turnberry Isle Miami

19999 West Country Club Drive

Aventura, FL 33180

Your participation in our annual Golf Classic contributes to our Schroeder Memorial Fund. These funds afford financial assistance to students that face financial difficulties due to a health crisis in their families.

Hole In One car provided by



NORTH DADE

For questions or for more information,
please contact Maria French.
mfrench@mccarthyhigh.org
or 954-434-2407

Golf Classic

Format:

Four-Person Scramble
Maximum 144 Golfers
Reserve Your Spot Early

- 11:30 am Registration
- 11:30-12:30 Lunch & Putting Contest
- 1:00 pm Shotgun Start
- 5:30 pm Dinner & Awards

All golfers will receive:

- Lunch & beverages throughout tournament
- Dinner and Complimentary Cocktails
- Welcome Bag

Other opportunities to show your support:

Gift Cards & Certificates
for Raffle Prizes.....any \$ amount

PAYMENT INFORMATION

Total Amount \$ _____

Enclosed check in the amount of \$ _____
Check # _____

Please charge the amount of \$ _____ to my credit card.

American Express Visa Mastercard Discover

Card Number _____

Expiration Date ____/____/____ CCV# _____

Name of Cardholder

Signature

Please include payment with the completed registration form, and identify any guests that may join you for dinner.

#1 Golfer's Name

Address

E-Mail

- Yes, I will attend the dinner buffet.
- Yes, I will attend the dinner buffet and include ____ guest(s).
(Please include \$40 for each dinner guest, if applicable.)
- No, I will be unable to attend the dinner.

#2 Golfer's Name

Address

E-Mail

- Yes, I will attend the dinner buffet.
- Yes, I will attend the dinner buffet and include ____ guest(s).
(Please include \$40 for each dinner guest, if applicable.)
- No, I will be unable to attend the dinner.

#3 Golfer's Name

Address

E-Mail

- Yes, I will attend the dinner buffet.
- Yes, I will attend the dinner buffet and include ____ guest(s).
(Please include \$40 for each dinner guest, if applicable.)
- No, I will be unable to attend the dinner.

#4 Golfer's Name

Address

E-Mail

- Yes, I will attend the dinner buffet.
- Yes, I will attend the dinner buffet and include ____ guest(s).
(Please include \$40 for each dinner guest, if applicable.)
- No, I will be unable to attend the dinner.