

CLARION HOSPITAL FOUNDATION

SPONSORSHIP OPPORTUNITIES

Friday, July 26, 2024 Clarion Oaks Golf Course 694 Mayfield Road, Clarion



2024 Golf Tournament Sponsorship Opportunities

TOURNAMENT SPONSOR: \$5,000

- Personalized banner with logo displayed at Clarion Oaks club house
- Sign recognition throughout event
- Full page ad in program book and recognition on inside cover
- Foursome package included(green fees, cart, all meals, mulligans, raffles, putting contest)

DINNER SPONSOR: \$3,000

- Sign recognition at event, including large sign at dinner buffet
- Company logo on napkins used during dinner
- Full page ad in program book and recognition on inside cover
- Foursome package included(green fees, cart, all meals, mulligans, raffles, putting contest)

LUNCH/BREAKFAST SPONOSR: \$2,000

- Sign recognition at event, including sign at lunch & breakfast areas
- Full page ad in program book and recognition on inside cover
- Foursome package included(green fees, cart, all meals, mulligans, raffles, putting contest)

GOLD SPONSOR: \$1,000

- Sign recognition at event, including cart sign
- ½ page ad in program book

SILVER SPONOSR: \$750

- Sign recognition at event, including cart sign
- ½ page ad in program book

BRONZE SPONSOR: \$500

- Sign recognition at event, including cart sign
- ¼ page ad in program book

HOLE SPONSOR: \$250

- Tee Sign
- ¼ page ad in program book

**DOOR PRIZE/AUCTION ITEMS TO BE GIVEN AWAY THE DAY OF THE EVENT ARE ALSO WELCOME FROM AREA BUSINESSES & ORGANIZATIONS.

DRIVING FORE	Friday, July 26 th Clarion Oaks Golf Course Clarion, PA 8:30 Registration 10:00 Shot Gun Start			
COMMUNITY HEALTH	<u>Sponsorsh</u>	ip Levels:		
CHARITY GOLF OUTING	 Tournament Sponsor Dinner Sponsor Lunch/Breakfast Sponsor Gold Sponsor 	\$5,000 (4some included) \$3,000 (4some included) \$2,000 (4some included) \$1,000		
Independence	Silver Sponsor	\$750		
HEALTH SYSTEM	☐ Bronze Sponsor	\$500		
CLARION HOSPITAL FOUNDATION	☐ Hole Sponsor	\$250		
Team and Sponsor Registration Form Company/Organization Name: (as you would like it to appear in print)				
Contact:				
Address: City, State, Zip: Phone:				
Email:				
Team Members: 1. 2.	3. 4.			
Sponsorship Level:				

To join us as a golf outing sponsor, please complete the form and return it with your payment by **June 26th**.

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Green Fees, Cart, Lunch, Dinner, Ra	Continental Breakfast, –	x \$150 per golfer Sponsorship Total Due
Payable by: (Check O	ne) 🗌 Cash 🗌 Check	k 🔲 Credit Card
Credit Card Number:		Expiration Date:/
Street Address:		CVV Code:
City:	State:	Zip:
	es checks payable to: Clario PO Box 236 East Butle ormation or to register by phone call by email at Bridget.Thornton@	er, PA 16029 Bridget Thornton at (814) 221-8923 or
The amount of the contribution the	hat is tax deductible is limited to the excess of any money Clarion Hospital. The hospital does not base buy	contributed by the donor over the value of goods and services provided b ring decisions on donations given.