

2019 Sponsorship Commitment

Register by July 19 at www.heywood.org/atholgolf



THE ANNUAL ATHOL HOSPITAL
Golf Classic
CELEBRATING 25 YEARS 1994-2019

- I/We would like to sponsor the 2019 Athol Golf Classic at the _____ Sponsor Level
- I/We would like to place an ad in the 2019 Athol Golf Classic Program Book
- I/We would like to make a donation of \$ _____ or gift in-kind of _____
- I/We would like to donate a raffle prize (may include goods, services or gift certificates)

Name and Title _____

Company or Organization _____

Email _____ Phone _____

Address/City/State/Zip _____

List my name/company/organization on signage and publications as: _____

Complimentary lunch and banquet dinner included in all golfer registration. Please let us know if you have a dietary restriction.

Program Book Advertisements

- Back cover – \$1,000 (color – 4.75"W x 7.625"H)
- Inside back cover – \$1,000 (color – 4.75"W x 7.625"H)
- Half page – \$250 (B&W – 4.75"W x 3.625"H)
- Inside front cover – \$1,000 (color – 4.75"W x 7.625"H)
- Full page – \$500 (B&W – 4.75"W x 7.75"H)
- Quarter page – \$150 (B&W – 2.187"W x 3.625"H)

Ads should be submitted as a print-ready PDF to selena.johnson@heywood.org by July 19, 2019.

- Check (enclosed, made payable to Athol Hospital)
- Bill me
- Credit card
- Visa
- MasterCard
- Discover
- AMEX
- Card Number _____ Exp. Date _____
- Signature _____
- Billing Zip Code _____
- Personal Card
- Corporate Card

Total golfers (\$150 each)	\$ _____
Sponsorship total	\$ _____
Donation total	\$ _____
Total enclosed	\$ _____

Names of Golfers/Dinner Options

- 1. _____
 Lobster Steak Vegetarian
- 2. _____
 Lobster Steak Vegetarian
- 3. _____
 Lobster Steak Vegetarian
- 4. _____
 Lobster Steak Vegetarian

REGISTRATION 10:30AM — SHOTGUN START NOON — THIS EVENT IS RAIN OR SHINE!