

Monday, May 6, 2024 | Bay Oaks Country Club

BENEFITTING YOUTH WITH SPECIAL NEEDS SPONSORSHIP LEVELS

GREEN FEE SPONSOR

\$5,250

\$3,500

\$1,500

\$250

- 2 Teams of 4 • Includes a hole sponsorship Preferential company signage on collateral and at event • Recognition at awards dinner • Reserved seating at awards dinner **PLATINUM SPONSOR** • Team of 4 Includes a hole sponsorship
- Preferential signage at tournament
- Recognition at awards dinner
- Reserved seating at awards dinner

GOLD SPONSOR

- Team of 4
- Signage at tournament

INDIVIDUAL PLAYER

| Preferential signage at awards dinner | \$2,500 |
|---|---------|
| GOLF CART SPONSOR Company signage on all golf carts | \$2,000 |
| • Company signage featured in lunch area | \$1,200 |
| HELICOPTER BALL DROP SPONSOR Ride for one person in helicopter Company signage at event | \$1,000 |
| BEVERAGE SPONSOR | \$850 |

(2 AVAILABLE)

- Company signage on beverage cart
- Option to decorate cart in your company colors/theme

HOLE SPONSOR

\$250

• Signage on a specific hole during the tournament



ALL TEAM SPONSORSHIPS INCLUDE:

- Green fee and golf carts
- Lunch and dinner
- Drinks on course and open bar at dinner
- Goodie bag for each player
- Recognition in press releases, advertising, website, event program and newsletter

SWING THROUGH FOR KIDS IN NEED



MONDAY, MAY 6, 2024

Bay Oaks Country Club • 14545 Bay Oaks Blvd • Houston, Texas 77059

Registration begins at **10:30 A.M.**

Tournament begins at **12:00 P.M.**

Dinner & auction begins at **5:00 P.M.**

PLAYER REGISTRATION FORM

SPONSORSHIP LEVEL

□ Green Fee Sponsor □ Platinum Sponsor □ Gold Sponsor □ Individual Player ^SO_{LO} Dinner Sponsor □ Golf Cart Sponsor Solution Sponsor
Helicopter Sponsor

So_{Co} Beverage Cart Sponsor □ Hole Sponsor

TELL US ABOUT YOURSELF

| Name | Date | |
|--------------|-------|-----|
| Company Name | | |
| Address | | |
| | State | Zin |
| | Email | |
| Phone | Email | |

TEAM MEMBERS

| Player 1: | Email |
|-----------|-------|
| Player 2: | Email |
| Player 3: | Email |
| Player 4: | Email |

ADDITIONAL DINNER GUEST (\$30 per person)

| Name of Guest | Name of Guest | | | | |
|---|-------------------|--------|--------|-------------------|-----------|
| PAYMENT OPTIONS | | | | | |
| Fill out entry form below or register online at divotsfordevereux.org | l. | | | | |
| □ Cash □ Check (Make checks payable to Devereux Texas) | Credit Card: 🛛 MC | 🗆 Visa | □ AmEx | Discover Discover | Amount \$ |
| Card Number | Expiration | | Secu | rity Code | |
| Name on Card | Signature | | | | |
| | - | | | | |

MAIL YOUR COMPLETED FORM TO:

Devereux Advanced Behavioral Health Office of Development 1150 Devereux Drive League City, Texas 77573

NOTE: Please return by March 1, 2024, to allow ample time for printing.

HAVE QUESTIONS?

Contact Joni Cordts at 281.316.5423 or jcordts@ devereux.org.

LEARN MORE ONLINE divotsfordevereux.org

