



**Community Health Centers of Oklahoma** 



#### Friday, November 3rd

4001 NE Grand Blvd, Oklahoma City, Oklahoma 73111

Format: Scramble
Registration & Breakfast: 8:00 A.M.
Shotgun Start: 9:00 A.M.

Lunch Provided: Brisket Sliders, Hamburgers, Hot Dogs

Appetizers & Awards: Immediately Following

# PREMIER SPONSOR OPPORTUNITIES

#### Ace Sponsor - \$12,000 (EXCLUSIVE Availability)

**TEAMS** 3 Teams of 4 Golfers with #1 Hole Tee-Off Privileges **RECOGNITION** Commemorative Ace Sponsor Signage, Banner at Check-In **FIRST MENTION IN ALL** Interviews, Press Releases, PSAs **HOLE SPONSOR** #1 Hole Sponsor; 3 Holes Total) **DIRECT WEBSITE LINK TO YOUR BUSINESS** Where It Will Remain for One Year **SPOKESPERSON** Thank Everyone for Coming, Send Out the Teams **LOGO IN/ON ALL** Advertising, Social Media Posts, Posters **LOGO ON TOURNAMENT WEBSITE** Where It Will Remain for One Year **MULLIGANS** 2 per Team **SWAG** Provide 100 of Your Company's Favorite Swag item for the Welcome Bags

# **Eagle Sponsor** - \$7,000 (Only ONE Available)

**TEAM** 2 Teams of 4 Golfers **RECOGNITION** Commemorative Eagle Sponsor Signage, Banner at Check-In **FIRST MENTION IN ALL** Interviews, Press Releases, PSAs **HOLE SPONSOR** #2 Hole Sponsor; 2 Holes Total **LOGO IN/ON ALL** Advertising, Social Media Posts, Posters **LOGO ON TOURNAMENT WEBSITE** Where It Will Remain for One Year **MULLIGANS** 2 per Team **SWAG** Provide 100 of Your Company's Favorite Swag item for the Welcome Bags

### Birdie Sponsor - \$3,000 (Only TWO available)

TEAM 1 Teams of 4 Golfers RECOGNITION Commemorative Birdie Sponsor Signage MENTION IN ALL Interviews, Press Releases, PSAs HOLE SPONSOR 1 Hole Sponsor LOGO IN/ON ALL Advertising, Social Media Posts, Posters LOGO ON TOURNAMENT WEBSITE Where It Will Remain for One Year MULLIGANS 2 per Team SWAG Provide 100 of Your Company's Favorite Swag item for the Welcome Bags

### Team Sponsor- \$1,000

**TEAM** 1 Team of 4 Golfers **HOLE SPONSOR** 1 Hole Sponsor **MULLIGANS** 2 per Team

# Other Ways to Participate

TEAM 4 Golfers \$500.00 INDIVIDUAL GOLFERS \$150.00

**VENDOR/PARTNER HOLE SPONSOR:** Includes Company Signage and Table. You Provide Tent, Promotional Items and/or Treats - \$250

DEADLINES

OCTOBER 10th: Sponorship Logos and Team/Names. Email Adobe Illustrator .ai or .eps logos to Vertisha Osborne.

OCTOBER 15th: 100-Of Your Favorite SWAG Items are Due. Call or email Vertisha Osborne to help arrange pick-up or delivery.

Mailed Forms: Community Health Centers of Oklahoma, Attention: Vertisha Osborne, P.O. Box 30589, Oklahoma City, OK 73140





# **SPONSOR COMMITMENT/REGISTRATION FORM**

| Ace Sponsor - \$12,000 (Onl           | y ONE available)  | <b>Team</b> Four (4) (          | Golfers - \$500 |
|---------------------------------------|-------------------|---------------------------------|-----------------|
| Eagle Sponsor - \$7,000 (Onl          | y ONE available)  | — Individual Golf               | er - \$150      |
| Birdie Sponsor - \$3,000 (Onl         | y TWO available)  | I can't Golf, but               | l would         |
| Team Sponsor - \$1,000                |                   | LOVE to make a                  |                 |
| VENDOR/PARTNER HOLE SPON              | SOR:              | \$                              | _               |
| Includes Company Signage and Table. Y |                   | nal Items and/or Treats - \$250 | 0               |
| Name of Company                       |                   |                                 |                 |
| Name for Recognition Purposes         |                   |                                 |                 |
| Spokesperson (If Ace Sponsor)         |                   |                                 |                 |
| Contact Person                        | Phone             |                                 |                 |
| Email                                 | Website           | e                               |                 |
| Address                               |                   |                                 |                 |
| City                                  |                   |                                 |                 |
| Team Member Names                     |                   |                                 |                 |
| 1                                     | 3                 |                                 |                 |
| 2                                     | 4                 |                                 |                 |
| Additional Sponsorship(s)             | \$                | Total Amount \$                 |                 |
| Payment Method CheckCredit            | Card #            | Expires _                       | CVV             |
| Authorized Signature:                 |                   |                                 | Quick-Access    |
| Donate Through PayPal at: www.commu   | ınityhealthok.org |                                 |                 |



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