

16th Annual Swing for the Star **Pro-Am Golf Tournament**

PRESENTING PLATINUM SPONSOR \$50,000

- Two (2) foursomes
- Two (2) PGA Pros to play with each foursome
- Two (2) Fore-caddies wearing smock with corporate logo or team name
- Logo recognition throughout the tournament including cart and hole signage, program and awards reception
- Two (2) Full page ads in program
- Premier reserved seating for twelve (12) invitations to VIP "Dinner of Hope"/awards reception with opportunity to address golfers
- Personalized brick paver displayed in the Star of Hope Walk of Hope
- Sponsor logo recognition on Star of Hope website and link to your company website if requested
- Opportunity to win incredible auction items
- Eight (8) unique player gift bags for sponsor and team members
- Team photo for each team member

PREMIER SPONSOR \$25,000

- One (1) foursome
- One (1) PGA pro to play with foursome
- One (1) Fore-caddie wearing smock with corporate logo or team name
- Logo recognition throughout the tournament including hole signage, program and awards reception
- One (1) page ad in program
- Prime reserved seating for eight (8) invitations to VIP "Dinner of Hope"/awards reception
- Opportunity to win incredible auction items
- Four (4) unique player gift bags for sponsor and team members
- Team photo for each team member

STELLAR SPONSOR \$12,500 (Limited Availability)

- One (1) foursome
- One (1) PGA pro to play with foursome
- One (1) Fore-caddie wearing smock with corporate logo or team name
- Recognition throughout the tournament including hole signage and program
- Reserved seating for eight (8) invitations to VIP "Dinner of Hope"/awards reception
- Opportunity to win incredible auction items
- Four (4) unique player gift bags for sponsor and team members
- Team photo for each team member



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TEAM SPONSORSHIP:

Swing for the Star Pro-Am Golf Tournal	ment benefiting Star of Hope,
t to sponsoring a team at the \$	level.
I understand this must be paid in full by October 15, 2018.	
Name of company or individuals as it will appear on all printed materials:	
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☐ My check made out to Star of Hope is enclosed.	
☐ Please charge my credit card.	
Exp. Date	Security Code
Dillion Address	
Billing Address	
Zip Code Ph	one
	Date
1	erstand this must be paid in full by Octob ompany or individuals as it will appear or I My check made out to Star of Hope I Please charge my credit card Exp. Date Billing Address Zip Code Ph