



# Annual Chamber Golf Classic

## Vero Beach Country Club

June 1, 2018

Rain Date: ???

### **Presenting Sponsor Opportunity - \$2,500**

- Foursome for 18 holes of golf
- Lunch for four at the Vero Beach County Club following tournament
- Signage:
  - Presenting sponsors “Welcome” sign at bag drop and registration
  - 2-logo signs at holes 1 and 18
  - 2-tee signs
- Company logo included in all tournament materials, Chamber newsletter, media releases, tournament flyers, and social media
- Company recognized on visual presentation during tournament luncheon
- Company named on Chamber website home page as one of Presenting Sponsors for tournament for 4-months May, June, July, August 2017

### **Eagle Sponsor Opportunity - \$1,000**

- Foursome for 18 holes of golf
- Lunch for four at the Vero Beach County Club following the tournament
- Company logo and/or name printed on all tournament material
- 1 logo sign
- 2 tee sign

### **Birdie Sponsor Opportunity - \$500**

- 2 players for 18 holes of golf
- Lunch for two at the Vero Beach County Club following tournament
- Company name in tournament program
- Tee sign

### **Tee Sign Sponsor Opportunity - \$125**

- Your company name on a tee sign
- Your company name in the Chamber newsletter as a tee sign sponsor of the event
- Your company named in the tournament program tee sign list

### **Individual Participants - \$130**

- 18 holes of golf with cart
- Lunch, Auction, Contest Awards
- Goody Bag

### **Questions?**

**Call Shannon Wesley at 772-567-3491**



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Choose your sponsorship:

- |   |  |
|---|--|
| <input type="checkbox"/> \$2,500 Presenting | <input type="checkbox"/> \$125 Tee Sign            |
| <input type="checkbox"/> \$1,000 Eagle      | <input type="checkbox"/> \$130 Individual Player   |
| <input type="checkbox"/> \$500 Birdie       | <input type="checkbox"/> Prize/ Goody Bag Donation |

Name of Sponsor: \_\_\_\_\_

Contact Name: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Person thank you note should be addressed to: \_\_\_\_\_

Address: \_\_\_\_\_

E-mail Address: \_\_\_\_\_

Payment Type:      Credit Card                      Check                      Invoice                      E-Invoice  
(Circle One)

Credit Card Info: \_\_\_\_\_  
(If Applicable)      Credit Card Number                      Exp. Date                      Billing Zip Code

Referred by: \_\_\_\_\_

Golfer #1 _____	Hcp/Avg _____	Lunch	Y	N
Golfer #2 _____	Hcp/Avg _____	Lunch	Y	N
Golfer #3 _____	Hcp/Avg _____	Lunch	Y	N
Golfer #4 _____	Hcp/Avg _____	Lunch	Y	N

***Thank you for your support!***

Please return the completed form and check to:

IRC Chamber of Commerce, 1216 21<sup>st</sup> Street, Vero Beach, FL 32960  
or email [events@indianriverchamber.com](mailto:events@indianriverchamber.com) to receive an e-invoice.

For In-Office Use:
___ SBA
___ Excel
___ PL
___ GC
___ TY/Inv
___ PS
___ PTTY