

MCHF Benefit Golf Tournament

Saturday, June 12, 2010

Sponsor Packages

Contest Prizes (see registration form)

Corporations that supply prize to be awarded
for a golfing contest.

Program Recognition & MCH Website Advertisement

Golf for One \$40

Light Breakfast

Green Fees, 18 holes

Entry into all individual hole competitions

Lunch, including complimentary beverages

Awards Ceremony

Green/Tee Sign \$100

Green/Tee Advertisement

Recognition in Golf Program

Lunch \$150

Tent Cards on all Dining Room Tables

Recognition in Golf Program

MCH Website Advertisement

Silver Package \$200

Golf for Two (includes items under Golf for One package)

Green/Tee Advertisement

MCH Website Advertisement

Program Recognition

Gold Package \$300

Golf for Four (includes items under Golf for One package)

Green/Tee Advertisement (hole 1)

MCH Website Advertisement w/ Link to company (large logo)

Recognition in Golf Program

Advertisement on next year's brochure

All sponsorships will receive a letter of participation with tax information
no later than three weeks after the golf tournament. ~ Thank You.

Morris County Hospital Foundation Benefit



Saturday, June 12, 2010

Council Grove Country Club

830 Hays Street

18 Holes • Lunch • Awards Ceremony

Prizes Awarded for:

Hole-In-One (Win \$5,000)

Closest to the Pin (2nd & 3rd shot)

Shoot-Out Contest

Shortest Drive on Fairway

Longest Putt on Green

Closest to the Pin

2nd Ball in the Water

Cash Prizes For all Flights

And Vendor Prizes

For questions please contact Caroline VonFeldt, Foundation Executive Director
at 620-767-6811, ext. 148
www.mrcohosp.com

Morris County Hospital Foundation 13th Annual Benefit

18 Hole Flighted Tournament
Four Man- Best Ball
Men & Mixed
Saturday June 12, 2010
Council Grove Country Club



Registration Form

Must Be Received By Thursday, June 10th

Entering as (circle one) Men Mixed

Registration & Light Breakfast 7:15 - 7:55 am
Shot-Gun Start 8:00 am
Lunch 11:00 am - 1:00 pm
Awards Ceremony 2:30 pm

\$40 per player # of players _____ x \$40 = \$ _____

\$15 for Golf Carts (if needed) # _____ x \$15 = \$ _____

Sponsor Package: (see inside of details)

Green/Tee Sign Package \$100 \$ _____

Lunch Sponsor \$150 \$ _____

Silver Package \$200 \$ _____

Gold Package \$300 \$ _____

Enclosed is my check for \$ _____

Or charge my Visa / Master

Card# _____ Exp. Date _____

(make checks payable to MCHF)

Return to: MCHF,
600 N Washington
Council Grove, KS 66846
Or Fax to 620-767-5611
www.mrcohosp.com

1. Golfer Name _____
Address _____
City _____ State _____ Zip _____
Phone (w) _____ (h) _____ Gender F M

2. Golfer Name _____
Address _____
City _____ State _____ Zip _____
Phone (w) _____ (h) _____ Gender F M

3. Golfer Name _____
Address _____
City _____ State _____ Zip _____
Phone (w) _____ (h) _____ Gender F M

4. Golfer Name _____
Address _____
City _____ State _____ Zip _____
Phone (w) _____ (h) _____ Gender F M

Proceeds to be used toward the purchase of a
Digital Mammography Machine