

# 18th Annual Memorial Golf Outing

Friday, June 26, 2020 ♦ Deer Valley Golf Club

## Sponsorship Opportunities

### Sponsorship Packages\*

**Presenting Golf Outing Sponsor\* \$1000**

Presenting Sponsorship includes a hole sponsorship, lunch sponsorship & signage, and a golf foursome. Also listed on all publicity materials, golf outing program/press releases/RRHH website/ etc.

\_\_\_\_\_  
(Name to be used on sign/print materials)

**Lunch Sponsorship and One Foursome\* \$500**

\_\_\_\_\_  
(Name to be used on sign/print materials)

**Hole Sponsorship and One Foursome\* \$400**

\_\_\_\_\_  
(Name to be used on sign/print materials)

**Lunch Sponsorship \$300**

\_\_\_\_\_  
(Name to be used on sign/print materials)

**Hole Sponsorship \$150 per hole**

\_\_\_\_\_  
(Name to be used on sign/print materials)

**General/Memorial Contribution** \_\_\_\_\_  
(list amount)

Listed in golf outing program/RRHH website/other areas as deemed appropriate.

**Questions? Call Karen at (815) 625-3858  
or email [karen@hospicerockriver.org](mailto:karen@hospicerockriver.org)**

**Thank you for supporting Rock River Hospice & Home  
and the 18th Annual RRHH Memorial Golf Outing!**

Company Name \_\_\_\_\_

Contact Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_ Zip \_\_\_\_\_

Email \_\_\_\_\_

Phone \_\_\_\_\_

\_\_\_\_ Cash \_\_\_\_ Check

Credit Card: \_\_\_\_ Visa \_\_\_\_ MasterCard \_\_\_\_ Discover

Cardholder's Name: \_\_\_\_\_  
(if different than above)

CC# \_\_\_\_\_

Exp. Date: \_\_\_\_\_ 3-Digit Verification # \_\_\_\_\_  
(on back of card)

**Return completed form & mail payment to:**

Rock River Hospice & Home  
Golf Outing  
2706 Avenue E, Sterling, IL 61081

# Rock River Hospice & Home

## 18th Annual Memorial Golf Outing

**Friday, June 26, 2020**

**Deer Valley Golf Club**

Registration & Lunch - **NOON** ♦ Shotgun Start - **1 p.m.**

Prizes & Awards Following Golf

Scramble Format

A Full Day of Fun For Just - **\$75 per golfer**

**\$300 per foursome**

(includes green fees, cart, lunch & awards)

**Yes, I want to join & support Rock River Hospice & Home in the 2020 Golf Outing!**

Business/Team Name: \_\_\_\_\_

Captain's Name/Golfer #1: \_\_\_\_\_

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Email: \_\_\_\_\_ Phone: \_\_\_\_\_

Player #2: \_\_\_\_\_

Player #3: \_\_\_\_\_

Player #4: \_\_\_\_\_

Total Enclosed \$ \_\_\_\_\_

Method of Payment: \_\_\_\_\_ Check Enclosed \_\_\_\_\_ Credit Card

Type of Card: \_\_\_\_\_ MasterCard Card #: \_\_\_\_\_

\_\_\_\_\_ Discover Exp. Date: \_\_\_\_\_

\_\_\_\_\_ Visa Three Digit Security # \_\_\_\_\_ on back of card

Authorized Signature: \_\_\_\_\_

Return registration & payment to: RRHH Golf Outing, 2706 Avenue E, Sterling, IL 61081

Questions? Call Rock River Hospice & Home at (815) 625-3858 / email [karen@hospicerockriver.org](mailto:karen@hospicerockriver.org)