

# "GOLF FOR GOLD"

# GOLF SCRAMBLE

**Monday, June 10, 2019**

**10 a.m. Shotgun Start**

**Woodland Hills**

(6000 Woodland Hills Dr., Eagle, NE)

Conducted by:



## SPONSORSHIP LEVELS:

### EAGLE Sponsor \$5,000 (Limit 1)

Logo recognition on all print/electronic media.

Logo recognition on tee-box signs.

Complimentary 4-person team (includes \*4 Super Tickets).

Display table in clubhouse near check-in.

Mention/introduction in announcements.

Social media shares.

### BIRDIE Sponsor \$2,500 (Limit 3)

Logo recognition on all print/electronic media.

Complimentary 4-person team (includes \*4 Super Tickets).

Meal or Beverage Cart Sponsorship.

### PAR Sponsor \$1,000

Logo recognition on all print/electronic media.

Complimentary 4-person team (includes \*4 Super Tickets).

Hole Sponsorship.

\*1 - Super Ticket = 2 mulligans & 10 raffle tickets (\$25 value)

**For more information or to register for the Golf Scramble go to: [www.NebraskaSportsCouncil.com](http://www.NebraskaSportsCouncil.com)**

#### Completed forms to:

Nebraska Sports Council, PO Box 29366, Lincoln, NE 68507 [MAIL]

info@nebraskasportscouncil.com [EMAIL]

402-413-1119 [FAX]

#### Questions?

info@nebraskasportscouncil.com or call 402-471-2544

## Proceeds Benefit Adopt an Athlete

Your donation allows all Nebrakans to enjoy fun and affordable competition and wellness opportunities. The Nebraska Sports Council is a 501 (c) (3) non-profit organization that operates without government support. We rely heavily on sponsoring businesses and individual donors like you for funding to provide opportunities for Nebraskans of all ages, abilities, ethnicities and socio-economic backgrounds.

YES! We would like to support the Adopt an Athlete program!

EAGLE  BIRDIE  PAR

(sponsorship level descriptions to the left)

Count on Us! Please contact us to discuss the financial and/or in-kind donation options.

## Contact Info

FIRST NAME \_\_\_\_\_

LAST NAME \_\_\_\_\_

COMPANY/ORGANIZATION \_\_\_\_\_

PHONE \_\_\_\_\_

EMAIL \_\_\_\_\_

## Payment Info

Pay with Credit Card ▾

NAME ON CARD \_\_\_\_\_

BILLING ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

CARD # \_\_\_\_\_

EXPIRATION DATE \_\_\_\_\_ CVV # \_\_\_\_\_

CARDHOLDER'S SIGNATURE \_\_\_\_\_

Check/Cash Enclosed  Please Send Invoice