

Cardholder Address:

19th Annual 2014 Clara Barton Open Golf Tournament

SPONSOR FORM

Sponsored by the Oxford Lions Club with proceeds to benefit camp scholarships at Clara Barton Camp & Camp Joslin

| DATE: PLACE: FORMAT: | Friday, June 13, 2014 (Rain or Shine) Pine Ridge Country Club, 28 Pleasant St, North Oxford, MA 4 Person Florida Style (Soft Spikes are Mandatory) The Barton Center for Diabetes Education, Inc. is a nonprofit 501 (c) (3) organization. | | |
|----------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------|--|
| | | | |
| | \$1,000 | Dinner Sponsor 4 dinner guests, full page ad in program book, signage at dinner ceremonies, recognition at dinner | |
| | \$750 | Cart SponsorFull page ad in program book, signage on golf carts used for the day | |
| | \$500 | Beverage Cart Sponsor Full page ad in program book, signage on beverage cart on the course, signage at the 19th Hole | |
| | \$200 | Tee SponsorFull Page ad in program book and signage on tee box | |
| PLACE: FORMAT: FORMAT: | \$200 | Breakfast Sponsor Complimentary coffee and donuts for all players, signage at breakfast station | |
| | \$100 | 1/2 Page Ad in Program Book | |
| Ad is attached | YesNo | All sponsors and ads due by May 30th | |
| I will donate th | e described iten | for the raffle: | |
| | 1 | vent but would like to make a donation to the campership fund. \$ | |
| Checks payab Mail to: | | arton Center for Diabetes Education, Inc. ox 356, North Oxford, MA 01537-0356 | |
| | ation or to inquire 8) 987-2056 x200 | about other sponsorship opportunities:3Email: events@bartoncenter.orgVisit us on the web at www.bartoncenter.org | |
| Sponsor Nan | ne: | Telephone: | |
| E-mail: | | Contact Person: | |
| Mailing Add | ress: | | |
| Please charge | e my MasterC | ard or VISA #Exp 3-digit security code: | |
| | | Authorization Signature: | |
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