Sponsorship Application

Sponsorship Due April 4th, 2022

Sponsor Name:	Contact Name:
Sponsor Website:	Email:
Sponsor Phone Number:	Contact Phone Number:
Mailing Address:	City, State, Zip:

Platinum - \$2,500.00

- 2 fivesome (includes green fees and dinner)
- Name and Logo displayed on sponsor banner
- Company banner displayed at the tournament
- Company information/promo materials in gift bags
- Awards ceremony Recognition

Silver - \$1,250.00

- 1 fivesome (incudes green fees and dinner)
- Name and Logo displayed on sponsor banner
- Company banner displayed at tournament
- Company information/promo materials in gift bags

Gold - \$1,750.00

- 1 fivesome (includes green fees and dinner)
- Name and logo displayed on sponsor banner
- Company information/promo materials in gift bags

Tee - \$500.00

- Signage at Tee
- Name recognition on tournament banner

Special Sponsorships

- Hole in one Sponsor 1,000
- Dinner sponsor 1,500
- Drink sponsor 1,000
- Prize sponsor
- Glow/Neon Vendor sponsor

Payment Information

In-Kind Cash or Check (make payable to: Valley Center for the Blind)		◎VCB
Card (circle one) Visa, Master Card, American Express		Valley Center for the Blind
Card#:	Expiration Date:	T: 559-222-4447
Name as it appears on card:		3417 W. Shaw Ave.
Card Holder's Signature:	3 Digit Code:	Fresno CA, 93711
Amount to be charged: \$		1707 Eye St.
Please send Invoice to Sponsor addr	ess above.	Bakersfield, CA 93301

Registration Form

Registration Due April 4th, 2022

Five Player Team - \$825.00

Main Player Name:	Main Player Phone Number:
Player Two Name (First & Last):	Secondary Phone Number:
Player Three Name (First & Last):	Main Contact Email:
Player Four Name (First & Last):	Mailing Address:
Player Five Name (First & Last):	City, State, Zip:

Individual Player - \$175.00

Player Name (First & Last):	Phone Number:
Email:	Secondary Phone Number:
Mailing Address:	City, State, Zip:

Payment Information

	aymene imormación
In-Kind Cash or Check (make payable to: Valley Center for the Blind)	
Card (circle one) Visa, Master Card, American Express	
Card#:	Expiration Date:
Name as it appears on card:	
Card Holder's Signature:	3 Digit Code:
Amount to be charged: \$	



Bakersfield, CA 93301