

Golf Registration & Hole Sponsorship Form



F.W. Huston Medical Center Foundation

Village Greens Golf Course

Ozawkie, KS

Friday, June 15, 2018, 1:00 pm

Rain Date: Saturday, June 16, 2018

4th Annual

Golf Tournament

Contact Name: _____ Company Name: _____

Mailing Address: _____

City: _____ State: _____ Zip Code: _____

Phone: _____ Fax: _____ E-Mail: _____

GOLF REGISTRATION

Name 1: _____ Name 2: _____

Name 3: _____ Name 4: _____

I am Registering as: Individual \$ 60
 Foursome \$ 240

Golf Registration should be received by **June 8 , 2018**

SPONSORSHIP

Sponsorships for tee boxes/greens receive a sign adjacent to the tee box or green of a selected hole. (You are able to set up a table or chairs and be present at your tee box. If this is something that is of interest to you please contact Melody Keirns for more details.) The tee box/green assignments will be made on a first come, first served basis. Each placard will contain the sponsor's name and logo. Please email your logo to Melody Keirns at hr@fwhuston.com before June 8, 2018, otherwise the place card will list only the company/organization name.

Number of Tee Boxes/Greens _____ @ \$100/Tee Box or Green Total \$ _____

Preferred Hole (s) (if available) _____

Golf Sponsorship Registrations should be received by **June 8, 2018**

Summary

Golf Registration \$ _____

Sponsorships \$ _____

Total \$ _____

**Thank you
for your
support!**

Send this form and company graphics (for
sponsorship) with **check payable to**
Jefferson County Memorial Hospital Foundation to:

Melody Keirns
F.W. Huston Medical Center
408 Delaware
Winchester, KS 66097
Phone: 844-536-9449
hr@fwhuston.com