

Join us Saturday, October 8th, 2022 **Roland Barkau Memorial Golf Course** 

1501 N. Waterworks Road, Okawville, IL 62271

1995-2022

## **Four Person Scramble**

Registration: 7:30AM | Shot Gun Start: 8:00AM | Raffles | Flight Prizes Contests on the Course Lunch and Awards following play

## **SPONSORSHIP OPPORTUNITIES**

**Tournament Hole Sponsor** 

\$1.500

Hole Sponsor, signage at check-in, full-page ad in program, special recognition at awards luncheon, ad in newsletter, Tournament Sponsor recognition in annual newsletter, stewardship report & social media.

**Diamond Hole Sponsor** 

\$1,000

Hole Sponsor, signage at check-in, 1/2-page ad in program, special recognition at awards luncheon, ad in newsletter, Diamond Sponsor recognition in annual newsletter, stewardship report & social media.

**Platinum Hole Sponsor** 

\$500

Hole Sponsor, signage at check-in, 1/4-page ad in program, Platinum Sponsor recognition in annual newsletter, stewardship report & social media.

**Gold Hole Sponsor** 

\$250

Hole Sponsor, 1/4-page ad in program, Gold Sponsor recognition in annual newsletter & stewardship report.

Silver Hole Sponsor

\$100

Hole Sponsor, Silver Sponsor recognition in annual newsletter & stewardship report.

Cash Donor Any gift is welcome!

Please complete the registration form on the back!

## Camp Ondessonk Golf Benefit Registration Form Saturday, October 8th, 2022 at the Roland Barkau Memorial Golf Course, Okawville, IL

\$110 per golfe	r	Reservation Total		
\$440 per team inc	No. of players _	X \$110 each =	\$	
<ul> <li>Golf and cart in four-pl scramble, no handicap</li> <li>Snacks and refreshme the course</li> <li>Lunch</li> <li>Skins and Mulligans</li> </ul>		gans included)		
			\$	
	Donation		\$	
	Total Enclosed		\$	
Donor/Sponsor Co	entact Information			
Company				
Address	State			
Day Phone	State _ E-mail Address			
Payment Informati ☐ I would like to pay wit	on th a check in the amount of	\$		
☐ I would like to pay wit	h a credit card in the amou	nt of \$		
O MasterCard	O Visa O Discover	O American Exp	•	
Name as it appears on card ZIP code of Billing Address				
Signature	ZIP cod	te of Billing Address		
Team Information Please provide contact information	on for each player			
Team Name:			ank you for	
Players:	*Cell Email	you	ır support!	

\*Please be sure to include a cell phone number, in case we need to contact you with important event updates.

**Phone** 

Please make checks payable to: "Camp Ondessonk"

and mail to: **Camp Ondessonk** ATTN: Golf Benefit 3760 Ondessonk Rd. **Ozark, IL 62972**