



7TH ANNUAL FAIRWAY FOR KIDS GOLF TOURNAMENT

Monday, May 10, 2010
Myopia Hunt Club
South Hamilton, MA

SPONSOR LEVEL	DONATION	SPONSOR BENEFITS
TITLE SPONSOR	\$10,000	<ul style="list-style-type: none"> <input type="radio"/> Two foursomes <input type="radio"/> Customized banner sign above the official scoreboard <input type="radio"/> Top-most placement on the Sponsor Board and recognition as Title Sponsor in all printed tournament materials <input type="radio"/> Logo embossed on a special item that will serve as the highlight of this year's gift bag
GOLD SPONSOR	\$5,000	<ul style="list-style-type: none"> <input type="radio"/> One foursome <input type="radio"/> Recognition as Gold Sponsor on Sponsor Board and in all printed tournament materials <input type="radio"/> Logo placement on items such as: shirts, hats, golf balls, flags, foursome photos
SILVER SPONSOR	\$3,500	<ul style="list-style-type: none"> <input type="radio"/> One foursome; recognition as Silver Sponsor on the Sponsor Board and in all printed tournament materials <input type="radio"/> Signage and/or logo placement on items including: shoot-out, golf carts, driving range, course booklets
BRONZE SPONSOR	\$2,000	<ul style="list-style-type: none"> <input type="radio"/> One foursome <input type="radio"/> Recognition on the Sponsor Board; hole sponsor sign

Please indicate your level of participation:

SPONSORSHIP OPPORTUNITIES

- TITLE SPONSOR \$10,000
- GOLD SPONSOR \$5,000
- SILVER SPONSOR \$3,500
- BRONZE SPONSOR \$2,000

OTHER WAYS TO PARTICIPATE

- TWOSOME \$1,200
- SINGLE PLAYER \$700
- DINNER TICKET DONATION \$250
- ON-COURSE TEE SIGN \$500
- SPONSOR BOARD LOGO \$250

I/We are not able to participate. Enclosed is a gift of \$ _____

Name:	Company:	
Address:		
City:	State:	Zip:
Phone:	Email:	

PAYMENT	
<input type="checkbox"/> Please send me an invoice	<input type="checkbox"/> Payment has been sent
<input type="checkbox"/> Check enclosed. Please make checks payable to: RFK Children's Action Corps	
<input type="checkbox"/> Please charge my (check one):	<input type="checkbox"/> Mastercard <input type="checkbox"/> Visa
Number:	Exp. Date:
Name on card:	

Please fill out this form and return to us in one of the following ways:
Mail: RFK Children's Action Corps, 11 Beacon Street, Suite 200, Boston, MA 02108
FAX: (617) 227-2069; Email: lsikora@rfkchildren.org

Questions? Contact Lisa McTighe Sikora at (617) 227-4183 or lsikora@rfkchildren.org