

GOLD, SILVER AND IRONS GOLF TOURNAMENT

MONDAY, MARCH 26, 2007 ▶ SOUTHBRIDGE GOLF CLUB
REGISTRATION ▶ 12:00 PM SHOTGUN START ▶ 1:00 PM

FORMAT: CAPTAIN'S CHOICE / SCRAMBLE

COME PLAY GOLF TO HELP SUPPORT
SPECIAL OLYMPICS GEORGIA'S
23,000 ATHLETES.

Please select an option below.

- **Presenting Sponsor** **\$2,600**
Includes: 3 - Four player teams; 2 Hole Recognition Signs; Company logo on sponsor board; Sponsor banner hung with premium placement (sponsor provides banner); Company name in brochure and program; Opportunity to include promotions in golfer's tournament bag; Recognition at the Golfers' Reception; Recognition in Georgia's Champions (Special Olympics Georgia's newsletter); Recognition on Special Olympics Georgia website; company listed in 2007 Special Olympics Georgia Annual Report; meal and door prize ticket per player.
- **Official Sponsor** **\$1,050**
Includes: 1 - Four player team; 1 Hole Recognition Sign; Company logo on sponsor board; Company name in brochure and program; Recognition at the Golfers' Reception; Recognition in Georgia's Champions (Special Olympics Georgia's newsletter); Company listed in 2007 Special Olympics Georgia Annual Report; meal and door prize ticket per player.
- **Hole and Team Sponsorship** **\$525**
Includes: 1 - Four player team; 1 Hole Recognition Sign; Goody bag, meal and door prize ticket per player.
- **Team of Four** **\$420**
Includes: 1 - Four player team; Goody bag, meal and door prize ticket per player.
- **Hole Sponsorship** **\$210**
Includes: 1 Hole Recognition Sign.



2007 Gold, Silver and Irons Registration Form *Save the date: Monday, March 26, 2007

Sponsorship Level: _____

Contact's Name: _____

Street Address: _____

City, State and Zip: _____

Daytime Phone: _____

Email Address: _____

Team Member Names: _____

Please select an option for your tax deductible payment.

- I have enclosed a check made payable to Special Olympics GA.
- Please bill my credit card, using the information provided below.

Type of Card: _____

PRINT Name on Card: _____

Card #: _____

Expir. Date: _____ Amt. to be Charged: _____

Signature : _____

Complete this registration form and return to:

Special Olympics Georgia

Special Olympics Georgia
Attn: April Aiken
4000 Dekalb Technology Parkway
Building 400, Suite 400
Atlanta, GA 30340

Fax: 770.216.8339

Phone: 770.414.9390, ext. 120

Email: April.Aiken@specialolympicsga.org