



# 19th Annual Marlow's Tavern Golf Classic

## Benefiting Special Olympics Georgia

September 18, 2017

Country Club of Roswell - Roswell

8:30-9:30am: Registration and Driving Range Open

9:45am: Welcome and Shotgun Start (lunch on carts)

4:00pm: Golfer Reception/Awards Dinner/Silent Auction at Country Club of Roswell

<p><b>Presenting Sponsor - \$5,000</b></p> <ul style="list-style-type: none"> <li>-Two, Four-Player Teams</li> <li>-Two Hole Recognition Signs</li> <li>-Logo on golf cart signs</li> <li>-Opportunity to distribute Branded Items</li> <li>-Logo in Tournament Program</li> <li>-Banner placement at Golf Tournament</li> <li>-Logo on Sponsor Board</li> <li>-Eight guest invitations to Reception</li> <li>-Recognition on SOGA Website</li> <li>-Name Listing in SOGA Annual Report</li> </ul> <p><b>Platinum Sponsor - \$2,500</b></p> <ul style="list-style-type: none"> <li>-One, Four-Player Team</li> <li>-Hole Recognition Sign</li> <li>-Opportunity to distribute Branded Item</li> <li>-Logo in Tournament Program</li> <li>-Banner placement at Golf Tournament</li> <li>-Logo on Sponsor Board</li> <li>-Four guest invitations to Reception</li> <li>-Recognition on SOGA Website</li> <li>-Name Listing in SOGA Annual Report</li> </ul> <p><i>*All golfers receive a gift, lunch, and the reception.</i></p>	<p><b>Gold Sponsor - \$1,700</b></p> <ul style="list-style-type: none"> <li>-One, Four-Player Team</li> <li>-Hole Recognition Sign</li> <li>-Listing in Tournament Program</li> <li>-Logo on Sponsor Board</li> <li>-Two guest invitations to Reception</li> <li>-Recognition on SOGA Website</li> <li>-Name Listing in SOGA Annual Report</li> </ul> <p><b>Silver Sponsor - \$1,500</b></p> <ul style="list-style-type: none"> <li>-One, Four-Player Team</li> <li>-Hole Recognition Sign</li> <li>-Listing in Tournament Program</li> <li>-Listing on Sponsor Board</li> <li>-Recognition on SOGA Website</li> <li>-Name Listing in SOGA Annual Report</li> </ul> <p><b>Bronze Sponsor - \$750</b></p> <ul style="list-style-type: none"> <li>-One, Two-Player Team</li> <li>-Listing in Tournament Program</li> <li>-Listing on Sponsor Board</li> <li>-Recognition on SOGA Website</li> <li>-Name Listing in SOGA Annual Report</li> </ul> <p><i>*All non-golfer sponsor levels receive one invitation to the reception.</i></p>	<p><b>Reception Sponsor - \$500</b></p> <ul style="list-style-type: none"> <li>-Recognition Sign at Reception</li> <li>-Recognition on SOGA Website</li> <li>-Name Listing in SOGA Annual Report</li> </ul> <p><b>Beverage Cart Sponsor - \$500</b></p> <ul style="list-style-type: none"> <li>-Recognition on Cart</li> <li>-Recognition on SOGA Website</li> <li>-Name Listing in SOGA Annual Report</li> </ul> <p><b>Hole-in-One Sponsor - \$500</b></p> <ul style="list-style-type: none"> <li>-Recognition Sign at Hole</li> <li>-Tent/Give-Away Opportunity at Hole</li> <li>-Recognition on SOGA Website</li> <li>-Name Listing in SOGA Annual Report</li> </ul> <p><b>Putting Contest Sponsor - \$500</b></p> <ul style="list-style-type: none"> <li>-Recognition Sign at Contest Hole</li> <li>-Tent/Give-Away Opportunity at Hole</li> <li>-Recognition on SOGA Website</li> <li>-Name Listing in SOGA Annual Report</li> </ul> <p><b>Hole Sponsor - \$250</b></p> <ul style="list-style-type: none"> <li>-Hole Recognition Sign</li> </ul> <p><b>PAR (Individual Player) - \$200</b> (Player will be paired up with other golfers)</p>
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**Count me in! Please register me in the 2017 Marlow's Tavern Golf Classic. I have enclosed payment in full.**  
**Registration deadline: August 28<sup>th</sup>** (please note: **tournament will sell out well in advance of the deadline date**).

Team Contact/Representative		
Name:		
Company:		
Address:		
City:	State:	Zip:
Cell Phone:		
E-mail:		

Team Members	Shirt Size
1.	
2.	
3.	
4.	

**Mail, fax, or e-mail registration and payment to:**  
 Susan Skolnick, Special Olympics Georgia  
 4000 Dekalb Technology Pkwy.  
 Suite 400, Bldg. 400  
 Atlanta, GA 30340  
 Fax: 770-216-8339 Phone: 770-414-9390 x111  
 susan.skolnick@specialolympicsga.org

\_\_\_\_\_Check Enclosed or \_\_\_\_\_Bill my Visa/MC/AmEx/Discover  
 Name on Card:\_\_\_\_\_

Card #:\_\_\_\_\_

Expiration Date:\_\_\_\_\_ Security Code:\_\_\_\_\_

Amount to Charge:\_\_\_\_\_

Signature:\_\_\_\_\_