

**MORE**  
than you think

*Disability Network  
Lakeshore's  
Second Annual Golf Outing*  
The Meadows at GVSU  
June 4, 2010

**Sponsor Registration Form:**

Organization Name: \_\_\_\_\_

Contact Person: \_\_\_\_\_ Telephone: \_\_\_\_\_

E-mail address: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

We would like to support Disability Network / Lakeshore's Second Annual Golf Outing at the following level:

- Corporate Sponsor – Investment of \$1,500**  
+ Signage at registration table  
+ Prominent placement of name and logo on FRONT of brochure\*  
+ Name and logo on DN/L website homepage  
+ Prominent recognition at dinner including logo display  
+ One free team (4 players) including dinner  
+ Name and logo on golf program

- Cart Sponsor – Investment of \$1,000**  
+ Name and logo sign in each cart  
+ Name and logo in brochure\*  
+ Name on DN/L website  
+ One free team (4 players) including dinner  
+ Recognition at dinner  
+ Name and logo on golf program

- Hole Sponsor – Investment of \$700**  
+ Name and logo on sponsored hole (24 x 24 sign)  
+ Name and logo in brochure\*  
+ Name on DN/L website  
+ One free team (4 players) including dinner  
+ Recognition at dinner  
+ Name on golf program

- Range Sponsor – Investment of \$500**  
+ Name and logo at the range (shared 24 x 36 sign)  
+ Name in brochure\*  
+ Name on DN/L website  
+ Recognition at dinner  
+ Name on golf program

- Beverage Station Sponsor – SOLD OUT**  
+ Name and logo on beverage station (12 x 18 sign)  
+ Name in brochure\*  
+ Name on DN/L website  
+ Recognition at dinner  
+ Name on golf program

- Tee Sponsor – Investment of \$150**  
+ Name and logo on sponsored tee (12 x 18 sign)  
+ Name in brochure\*  
+ Name on DN/L website  
+ Recognition at dinner  
+ Name on golf program

- Donations**  
If you would like to provide donations for prizes or giveaways, please contact Kathryn Gillen: 616.396.5326 or [kathryn@dnlakeshore.org](mailto:kathryn@dnlakeshore.org).

Enclosed is our check\*\* made payable to Disability Network/Lakeshore in the amount of \$\_\_\_\_\_. Kindly send this form and your donation by **March 31<sup>st</sup>** to: Disability Network/Lakeshore, ATTN: Kathryn Gillen, 426 Century Lane, Holland, Michigan 49423.

\*if commitment received by March 31st

\*\*all donations are tax-deductible