

# Golfer Registration Form

Contact Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Company Name (if applicable) \_\_\_\_\_ Email: \_\_\_\_\_

Street: \_\_\_\_\_ City: \_\_\_\_\_ St: \_\_\_\_\_ Zip: \_\_\_\_\_

## Player Information

Name: \_\_\_\_\_ Email: \_\_\_\_\_ Phone: \_\_\_\_\_

### *Appropriate golf attire required.*

*Return completed form by August 1, 2021 to the Daviess Community Foundation at:*

*1314 E Walnut Street, Washington, IN 47501.*

*Your non-refundable sponsorship/registration is tax deductible to the extent allowed by law.*

### Gold Sponsor - \$2500

- Four tournament entries
- Signage with company logo on course
- Logo and web link on DCH website
- Logo on tournament promotional materials\*
- Opportunity to provide sponsor gift in goody bags
- Social media postings leading up to the event
- Recognition during awards

### Lunch Sponsor - \$1500

- Two tournament entries
- Signage with company logo at lunch
- Logo on promotional materials\*
- Logo and web link on DCH website
- Opportunity to provide sponsor gift in goody bags
- Recognition during awards

### Golf Cart Sponsor - \$1000

- Company logo on all golf carts
- Logo and web link on DCH website
- Opportunity to provide sponsor gift in goody bags
- Recognition during awards

### Prize Sponsor-\$400

- Signage on prize table
- Recognition during awards

### Tee Sponsor-\$200

- Signage at tee box
- Recognition during awards

*\*Sponsor logo must be provided to DCH prior to print deadlines.*



Since 1993, the Annual DCH Foundation Golf Benefit has been raising funds to support numerous projects including the Health Careers Scholarship Program, the Lohano Center for Advanced Medicine specialty services expansion, 3D mammography and many other patient-focused projects.

We look forward to spending the day with you and your team as we enjoy a lovely summer day of golf, networking, and raising money to fund DCH Foundation projects.

## Sponsorship Levels

### Presenting Sponsorship - SOLD

- Eight tournament entries
- Signage with company logo at registration
- Signage with company logo on course
- Logo on tournament promotional materials
- Logo and web link on DCH website
- Additional company info/gift included in goody bags
- Premium sponsor gift for players with logo
- Social media postings leading up to the event
- Opportunity to partner with DCH on promotional media events
- Opportunity to speak at start of tournament
- Recognition during awards
- Listed on donor wall at Daviess Community Hospital
- Right of refusal for 2022 Tournament

### Platinum Sponsor - \$3500

- Six tournament entries
- Signage with company logo on course
- Logo on tournament promotional materials\*
- Logo and web link on DCH website
- Opportunity to provide sponsor gift in goody bags
- Social media postings leading up to the event
- Recognition during awards



812.254.8858



asteiner@dchosp.org  
www.dchosp.org



Country Oaks Golf Course  
Montgomery, Indiana



# 28TH ANNUAL GOLF BENEFIT

## August 12, 2021

Country Oaks Golf Course  
Montgomery, Indiana

Presented by



## Event Details

**Thursday, August 12, 2021**  
**Country Oaks Golf Club**  
5064 East US Hwy 50  
Montgomery, IN 47558

**11:00 am (EST)**  
**Check-in**  
**Lunch**

**11:50 am (EST)**  
**Announcements**

**12:00 pm (EST)**  
**Shotgun start**

**Awards Reception with hors d'oeuvres**  
**immediately following play.**

### Our Mission:

*The Davies Community Hospital Foundation's mission is to enhance and complement the mission of Davies Community Hospital, by providing a means for philanthropic support of the hospital and by strengthening relationships between the hospital and the people who live in our communities.*

[www.dchosp.org/foundation](http://www.dchosp.org/foundation)

## 28th Annual Davies Community Hospital Foundation Golf Benefit

Yes! I would like to support the  
DCH Foundation Golf Benefit as:

SOLD - \$5000 Presenting Sponsor

\$3500 Platinum Sponsor

\$2500 Gold Sponsor

\$1500 Lunch Sponsor

\$1000 Golf Cart Sponsor

\$400 Prize Sponsor

\$200 Tee Sponsor

\$125 Individual Golfer

EXTRA: \$50 Team Mulligans & Games  
I/we cannot attend, but want to support the

Foundation: \$ \_\_\_\_\_

Payment information:

\_\_\_\_\_ Check Enclosed

\_\_\_\_\_ Credit Card (circle): Visa    Mastercard    Discover

Exp. Date: \_\_\_\_ / \_\_\_\_    Sec. Code: \_\_\_\_    Zip Code: \_\_\_\_

Card No. \_\_\_\_\_

Name on Card: \_\_\_\_\_

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

*(Make checks payable to DCH Foundation)*