



PIAVA/DC **Special Olympics** Golf Tournament
 The Brookwoods Golf Club - Quinton, VA
 Monday, May 7, 2018



Sponsorship Opportunities

Complete and return to: PIA VA/DC 8751 Park Central Drive, Suite 140, Richmond, VA 23227
 Phone: (804) 264-2582 Fax: (804) 266-1075 carol@piavadc.com www.piavadc.com

Name: _____ Company: (if applicable) _____
 Address: _____ City/State/Zip: _____
 Telephone: _____ Email: _____

_____ Lunch <i>Non-Exclusive – No Limit</i>	\$250
_____ Refreshments	\$100
_____ Beverage Cart - Includes Signage on Cart <i>Exclusive - Maximum: 2 Carts</i>	\$250
_____ Golf Hole Sponsor Includes Signage on one Hole	\$150
_____ Hole-In-One Sponsor - Includes Signage on Hole (Sponsor responsible for payment in advance.)	\$350
_____ Longest Drive - Includes Signage on Hole & Prize (Sponsor responsible for payment in advance. PIA will use payment to purchase the prize.) <i>Exclusive – Maximum 1</i>	\$150
_____ Closest to the Pin - Includes Signage on Hole & Prize (Sponsor responsible for payment in advance. PIA will use payment to purchase the prize.) <i>Exclusive – Maximum 5</i>	\$150
_____ Closest to the Line - Includes Signage on Hole & Prize (Sponsor responsible for payment in advance. PIA will use payment to purchase the prize.) <i>Exclusive – Maximum 1</i>	\$150
_____ Door Prize - Includes Recognition at presentation of Prize (Sponsor responsible for payment in advance. PIA will use payment to purchase the prize.)	\$150
_____ Putting Contest - Includes Signage on Putting Green & Prize to Winner. (Sponsor responsible for payment in advance. PIA will use payment to purchase prize.) <i>Exclusive – Maximum 1</i>	\$150
_____ Golf Package - Includes 4 Players plus signage on one Hole. (See Registration Form to register players.)	\$425

Give-Away Items – Our company will contribute the following items as giveaways or to be awarded as Door Prizes at conclusion of golf. (Items should be submitted to PIA Office no later than April 21, 2017.)

List items: _____

Donation – I am unable to sponsor the golf event. However, I would like to contribute to Special Olympics. Donation Amount: \$ _____

DEADLINE TO SUBMIT SPONSORSHIPS: April 20

Payment Information: _____ Check being mailed _____ Charge the following card

Card # _____ Exp. _____ Security Code _____

Name on Card: _____

Credit Card Billing Address: _____

City: _____ State: _____ Zip: _____