The 16th Annual Northern Nevada Dental Health Programs / Joel F. Glover, DDS Charity Golf Tournament 2018

All proceeds to benefit Adopt a Vet Dental Program; our veterans in need. Tax ID #88-0411192

Place: LakeRidge Golf Club, Reno **Date:** Friday, September 21, 2018 7:00 a.m. ~ Breakfast & Golfer Check-In / 7:45 a.m. ~ ShotGun Start/Tee Time Times:

1:00 p.m. (est. time after golf) ~ BBQ Lunch, Hosted Beer, Raffle Winners & Awards

Format: Scramble **Mulligans:** available for purchase at tournament

Sponsorship/Participation Opportunities MAJOR SPONSOR \$5,000 Your Company name/logo prominently advertised on golfer's gift Pre- and Post-event publicity including social media Special recognition during Tournament and Award BBQ Tee Signage including invitation for company representation on course > Three (3) Foursome reservations to play **GOLF SPONSOR** \$2,500 Your company name/logo on Tournament golfer's program and signage Special recognition during Tournament & Award BBQ Tee Signage including invitation for company representation on course > Two (2) Foursome reservations to play **HOLE-IN-ONE VEHICLE SPONSOR** \$2,500 Your company name/logo on Tournament golfer's program and signage Special recognition during Tournament & Award BBQ > Tee Signage including invitation for company representation on course > Two (2) Foursome reservations to play ➤ Showcase 6-7 additional vehicles throughout LakeRidge (vehicle hole-in-one insurance paid by you) **HOLE/TEE SPONSOR:** \$1,350 Recognition during tournament and Award BBO Tee Signage including invitation for company representation on course One (1) Foursome reservation to play **FOURSOME only:** \$ 940 **BREAKFAST SPONSOR:** \$1,100 **INDIVIDUAL ENTRY TO PLAY: BBQ LUNCH SPONSOR:** \$1,800 \$ 250 **HOLE SPONSOR ONLY:** \$ 550 **BBQ LUNCH SPONSOR w/ Foursome** \$2,400 Name on Signage: FRIENDS OF NNDHP GIFT: \$ 250 ADDITIONAL GUEST FOR BBQ (can't attend tournament but want to support) (we welcome spouses/friends/family to join you at BBQ) **Team/Player Registration** (All are welcome: Singles, Twosomes, Foursomes or we'll pair you up) TEAM (SPONSOR'S) NAME:____ Golfer #2_____ Golfer #1_____ Email: Email: _____ Phone:____ Phone: Golfer #3_____ Golfer #4_____ Email: _____ Email:_____ Phone: ______ Phone: *If you have a team pairing preference please state:_____ I am unable to participate this year but would like to sponsor the above circled entry: OR TOTAL AMOUNT ENCLOSED \$_____ (Check, Visa, MasterCard, Discover, or Amer Xpress) Sec. code: _____ Statement Zipcode: _____ Name on Card: _____ Send to: Northern Nevada Deptal Hoolth Brown

Send to: Northern Nevada Dental Health Programs, 5605 Riggins Court, Suite #101A, Reno, NV 89502, Office: (775) 337-0296, or **FAX to: (775) 337-0298** or **email: nnds@nndental.org** or **www.nndhp.org**