



SPONSOR REGISTRATION

All sponsorships are first come - first serve with a deadline for 9/6/14 to be recognized in Golf Program.

Sponsor Name _____
 Address _____
 City _____ State _____ Zip _____
 Phone _____ Email _____

Please Check the Appropriate Level Of Participation

- | | | | | | |
|--------------------------|------------------------|-------------|--------------------------|--|----------|
| <input type="checkbox"/> | Platinum Sponsor: | \$10,000.00 | <input type="checkbox"/> | Hole Sponsor: | \$350.00 |
| <input type="checkbox"/> | Gold Sponsor: | \$5,000.00 | <input type="checkbox"/> | Closest To Pin Sponsor: | \$500.00 |
| <input type="checkbox"/> | Silver Sponsor: | \$2,500.00 | <input type="checkbox"/> | Longest Drive Sponsor: | \$500.00 |
| <input type="checkbox"/> | Lunch Sponsor: | \$3,500.00 | <input type="checkbox"/> | Golf Program Ad: \$300.00 (1/4 Page) | |
| <input type="checkbox"/> | Cocktail Hour Sponsor: | \$2,500.00 | <input type="checkbox"/> | Be a Player: | \$575.00 |
| <input type="checkbox"/> | 19th Hole Sponsor: | \$2,500.00 | | (Must Fill Out Player Registration Form) | |
| <input type="checkbox"/> | Driving Range Sponsor: | \$1,000.00 | | | |
| <input type="checkbox"/> | Putting Green Sponsor: | \$1,000.00 | | | |

My Check Payable to RE/MAX-CMN is enclosed for \$ _____
 Visa – Master Card – American Express – (Circle One)
 Name On Card _____
 Card Number _____
 Expiration Date _____ CW (3 digit Code On Back Of Card) _____
 BillingAddressOfCardHolder _____

Fax To 908.462.8008 or email PDF to info@miraclesmadesimple.org.

MMS Golf Invitational | c/o RE/MAX of New Jersey | 509 South Lenola Road, Suite 5, Moorestown, NJ, 08057

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