



BENEFITING
DAVID LAWRENCE
CENTERS
FOR BEHAVIORAL HEALTH®

Friday, October 22 | Quail Creek Country Club

18 – Hole Scramble

Registration & Lunch 11:30am | Tee-off 1:00pm | Reception 5:30pm

www.ChipInForDLC.org

Presenting Sponsor - \$7,500

- Event naming rights (ex. Chip in for DLC Presented by [Company Name])
- Prominent positioning of company logo/name on all advance marketing and on-site signage – *pending print deadlines*
- Company logo/name on event webpage with link to company website
- Recognition from podium at event
- Six (6) cart path stamps on course
- Tee sign recognition on all holes
- Company logo on all golf cart player plaques
- Sponsor Information Table at event registration
- Option for logoed item in player gift bags
- Two (2) Foursomes
- Eight (8) Super Tickets
- Listing in DLC Annual Report
- Company featured in DLC *Centered* Newsletter spring edition

David Lawrence Mental Health Center, Inc. is a nonprofit organization, Registration# CH2888, Tax ID# 59-2206025. No goods or services were exchanged for your charitable giving. Therefore, 100% of your gift is tax deductible as allowable by law. A COPY OF THE OFFICIAL REGISTRATION AND FINANCIAL INFORMATION MAY BE OBTAINED FROM THE DIVISION OF CONSUMER SERVICES BY CALLING TOLL-FREE (800-435-7352) WITHIN THE STATE. REGISTRATION DOES NOT IMPLY ENDORSEMENT, APPROVAL, OR RECOMMENDATION BY THE STATE.



Friday, October 22 | Quail Creek Country Club 18 – Hole Scramble

Registration & Lunch 11:30am | Tee-off 1:00pm | Reception 5:30pm

Reception Sponsor - \$5,000

- Company logo on sponsorship signage at Reception
- Company logo/name included on all advance marketing – *pending print deadlines*
- Company logo/name on event webpage with link to company website
- Recognition from podium at event
- Four (4) cart path stamps on course
- Tee sign recognition on nine (9) holes
- Company logo on all golf cart player plaques
- Option for logoed item in player gift bags
- One (1) foursome
- Listing in DLC Annual Report

Eagle Sponsor - \$2,500

- Company logo/name included in advanced marketing – *pending print deadlines*
- Company logo/name on event webpage
- Recognition from podium at event
- Company logo/name on sponsorship signage of one (1) on-course contest
- Two (2) cart path stamps on course
- Tee sign recognition on nine holes
- Company logo on all golf cart player plaques
- One (1) foursome
- Listing in DLC Annual Report

Birdie Sponsor - \$1,750

- Company logo/name included on all advance marketing – *pending deadlines*
- Company logo/name on event webpage
- Recognition from podium at event
- Two (2) cart path stamps on course
- Tee sign recognition on nine (9) holes
- Company logo on all golf cart player plaques
- One (1) foursome
- Listing in DLC Annual Report

Player Gift Sponsor - \$1,250

- Company logo included in advanced marketing – *pending deadlines*
- Recognition from podium at event
- Company logo/name on event webpage
- Inclusion of approved logoed item in player gift bags
- Listing in DLC Annual Report

Hole Sponsor - \$500

- Signage at two (2) holes
- Listing in DLC Annual Report

Name Plaque Sponsor - \$250

- Company logo on all golf cart player plaques
- Listing in DLC Annual Report

Foursome - \$1,000
Individual Player - \$250
Awards Reception Only - \$50



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Sponsorship and Registration – Please Select:

___ **Presenting Sponsor - \$7,500**

___ **Reception Sponsor - \$5,000**

___ **Eagle Sponsor - \$2,500**

___ **Birdie Sponsor - \$1,750**

___ **Player Gift Sponsor - \$1,250**

___ **Hole Sponsor - \$500**

___ **Golfer Name Plaque Sponsor - \$250**

___ **Foursome - \$1,000**

___ **Individual Golfer - \$250**

___ **Awards Reception Only - \$50**

Company/Registrant Name: _____

Name as it should appear on marketing materials:

(please send high resolution logo to donorcare@dlcenters.org)

Address _____

Phone _____ Email _____

Website _____

Player 1 _____ Player 2 _____

Player 3 _____ Player 4 _____

Golfer Handicaps: Player 1: _____ Player 2: _____ Player 3: _____ Player 4: _____

Payment Type:

Please charge my: _____ Visa _____ Mastercard _____ Discover _____ American Express

Name on Card (please print): _____

Card Number: _____ CVV: _____ Exp. Date: _____

Signature: _____

Mail this form with a check made payable to: David Lawrence Centers, Attn: Development, 6075 Bathey Lane, Naples, FL 34116

For more information and to register, please visit www.ChipInForDLC.org

Questions? Contact Briana Shipe Karaszi at BrianaSK@DLCenters.org or 239-345-1445