

7th ANNUAL



ATLANTIC DENTAL CARE CHARITY GOLF CLASSIC

2020 SPONSORSHIP AND ENTRY FORM

PLEASE CHECK SPONSORSHIP:

Apparel Sponsor \$12,500.00

Golf Cart Banner Sponsor \$10,000.00

Flag Pole Signage Sponsor \$7,500.00

Gold Hole In- Cup Sponsor \$5,000.00

Dinner Sponsor \$3,000.00

Lunch Sponsor \$2,000.00

Refreshment Stand Sponsor \$1,200.00

Driving Range Sponsor \$1,000.00

Beverage Cart Sponsor \$1,000.00

Team Sponsor \$ 800.00 (fill out the back of this form)

Hole Sponsor \$ 250.00

Individual Player \$ 200.00 (fill out the back of this form)

Hole-in-One Sponsor - Contact us to confirm details (mikelec@londonbridgesmile.com)

Monetary Contribution \$ _____

Raffle Gift: Description _____ Value \$ _____

All entry fees and forms must be received by **MAY 26, 2020**

Please submit high quality logos by MAY 26, 2020 to ensure we have enough time to get them on the promotional items and signage. Please submit your logos separately to Dr. Harry Squire at drsquire@londonbridgesmiles.com.

Mail checks and participant form to:

**Atlantic Dental Care
Charity Golf Classic 2020
3196-100 Silver Sands Circle
Virginia Beach, VA 23451**

**Make checks payable to:
ADC Charity Golf Classic 2020**



ATLANTIC DENTAL CARE

CHARITY GOLF CLASSIC

2020

Sponsor Name _____ Company Name _____

Best contact: email | mobile phone | work phone | home phone (for raindate)

Email address _____ Phone _____

TEAM #1: Name of Team _____

Player 1 Name _____ Shirt Size XXL XL L M S (Male / Female)

Player 2 Name _____ Shirt Size XXL XL L M S (Male / Female)

Player 3 Name _____ Shirt Size XXL XL L M S (Male / Female)

Player 4 Name _____ Shirt Size XXL XL L M S (Male / Female)

TEAM #2: Name of Team _____

Player 1 Name _____ Shirt Size XXL XL L M S (Male / Female)

Player 2 Name _____ Shirt Size XXL XL L M S (Male / Female)

Player 3 Name _____ Shirt Size XXL XL L M S (Male / Female)

Player 4 Name _____ Shirt Size XXL XL L M S (Male / Female)