

Beacon Hill Country Club • Atlantic Highlands, N.J.

SPONSORSHIPS

You will be set to impress with a sponsorship at the PIANJ 2016 Golf Classic. Sponsoring the PIANJ Golf Classic doubles your clout-giving you a fantastic day of golf, dining and camaraderie while providing support for Special Olympics New Jersey programs serving thousands of New Jersey children and adults with intellectual disabilities. It's the perfect event to take your most important clientsand yourself!

SPONSOR REGISTRATION

Contact name
Agency/company
Address
City/State/ZIP
Phone
Email

SPONSORSHIP CHOICES

Please check your sponsorship choice. Sponsorships are available on a first-come, first-served basis. If your sponsorship selection already has been taken, we will contact you with an alternative. Sponsorships with payment need to be secured by Sept. 23, 2016, to assure proper signage.

		SPONSORSHIP ONLY	SPONSORSHIP WITH FOURSOME
Double eagle		\$2,500	\$3,500
	Golfer gifts		
	Dinner		
	Golf carts		
	Course refreshment	S	
	Cocktail party		
Eagle		\$1,250	\$2,250
	Golf ball sleeves		
	Closest to the pin		
	Hole-in-one		
	Putting contest		
Birdie		\$750	\$1,750
	Driving range		
	Putting green		
Par	:	\$600	\$1,600
	Tee/green combo (8	3)	
Hole		\$350	\$1,350
	Tee (8)		
	Green (8)		
		Spons	sor accounting: 222:100

ATTENDEE REGISTRATION

\$1,000/foursome; \$250/golfer (all-inclusive price)

\$130 person (cocktails and dinner only).

Please provide complete information on all your golfers to assure each receives a confirmation (including driving directions) and that each is listed on our golfer lists, posted the day of the event. If we do not have the full information before Sept. 28, 2016, the primary contact will be responsible for keeping others in his/her golfing group informed about tournament details. Please make a copy of this form if you are registering more than four people. *pia.org/events/classic/2016

1. Primary contact name	3. Contact name
Agency/company	Agency/company
Address	Address
City/State/ZIP	City/State/ZIP
Phone	Phone
Email Greek this box <i>only</i> if this is a dinner-only registration.	Email Check this box <i>only</i> if this is a dinner-only registration.
2. Contact name	4. Contact name
Agency/company	Agency/company
Address	Address
City/State/ZIP	City/State/ZIP
Phone	Phone

Email

PAYMENT CALCULATION

Sponsorship

Email

Return with completed sponsor registration page

Sponsorship with foursome

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Return with both completed sponsorship and
attendee registration pages.
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Golf package

golf package(s) @ \$250/golfer Return with completed attendee registration page.

Dinner only

@ \$130/person—includes cocktails Return with completed attendee registration page.

TOTAL \$

• Check this box *only* if this is a dinner-only registration.

Payment is due at time of registration. Please note that registration refunds cannot be made without at least one full week's notice of cancellation. Attendee accounting 999-100

METHOD OF PAYMENT

Credit: Visa MasterCard AmEx Discover

Check this box *only* if this is a dinner-only registration.

Credit card no.

Cardholder's name

Signature

Expiration date Verification no. Amount

Please send checks to: Special Olympics New Jersey, Attn.: Beth Conover; 1 Eunice Kennedy Shriver Way, Lawrenceville, NJ 08648. Please reference PIA Golf Classic.

