



**American Red Cross  
24<sup>th</sup> Annual Golf Scramble  
Sponsorship Agreement**



Company Name \_\_\_\_\_  
(As you would like it to appear on all materials)

Contact Person \_\_\_\_\_ Title \_\_\_\_\_

Mailing Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Telephone \_\_\_\_\_ Fax \_\_\_\_\_

Email \_\_\_\_\_

**Sponsorship Levels & Benefits: *Please check the appropriate box***

**Title Sponsor - \$2,000**

- ◆ Presented by/Logo on all printed materials & publicity
- ◆ Signage at the event
- ◆ Green fees waived for two foursomes

**Eagle Sponsor - \$1,000**

- ◆ Logo on all printed materials & publicity
- ◆ Signage at the event
- ◆ Green fees waived for one foursome

**Birdie Sponsor - \$500**

- ◆ Signage at the event
- ◆ Green fees waived for one foursome

**Hole Sponsor - \$100**

- ◆ Hole sponsor sign on green

**Method of Payment: *Please make checks payable to American Red Cross – Ottawa Co.***

Check enclosed    MC    Visa    Discover    Am Ex

Credit Card # \_\_\_\_\_ Expiration date \_\_\_\_\_

Name of Cardholder/Signature \_\_\_\_\_

Billing Address \_\_\_\_\_

By: \_\_\_\_\_  
(Company Authorized Representative)

By: \_\_\_\_\_  
(American Red Cross Representative)

Date: \_\_\_\_\_

Date: \_\_\_\_\_

If you have any questions, please contact Beth Leggett at 419-734-1100 or email [redcross@thirdplanet.net](mailto:redcross@thirdplanet.net) . Please send completed form to: 1854 E. Perry St., Suite 600, Port Clinton OH 43452.