

VECA BELLINGHAM 5TH ANNUAL GOLF TOURNAMENT

Sponsorship Opportunities Supporting Opportunity Council

SATURDAY, AUGUST 2 | 11AM TEE OFF, FOLLOWED BY DINNER

AVALON GOLF LINKS

19345 KELLEHER RD | BURLINGTON, WA 98233

	Title Sponsor	Beverage, Snack Cart, Cabana, Driving Range, Putting & Chipping Sponsor	Hole Sponsorship (Every hole if we can get it or contest holes)
LEVEL & BENEFITS	\$7,500	\$5,000	\$3,000
Golf Foursome	2	1	1
Official Course Banner	Logo		
Logo on course map	√	√	√
Promotional Material Recognition	Logo	Logo	Logo
Course Signage	Tee Box & Carts	Beverage or Snack Cart or Cabana or Driving Range or Putting or Chipping	Tee Box
Host a Hole & Hang a Banner	√	√	✓

Business Name:	Sponsor	Level:		
Contact Name:	F	Phone:		
Address:	Email: _			
City:	State: _	Zip:		
Total Sponsorship: \$	An Invoice will be	An Invoice will be sent for either check or CC Payment options		
Signature:		Date:		

Please complete form and return to **Kelly Gollen** at kgollen@veca.com.

For more information please reach out to either **Aaron Thompson**, athompson@veca.com or **Justin Morgan**, jmorgan@veca.com



Through direct service, collaboration, and investment in the future, we're dedicated to helping people and building communities where everyone has the chance to thrive and contribute.

For more information, please visit https://www.oppco.org/



VECA BELLINGHAM 5TH ANNUAL GOLF TOURNAMENT *Registration Form*

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AVALON GOLF LINKS

19345 KELLEHER RD | BURLINGTON, WA 98233

COST: \$150/INDIVIDUAL, \$600/FOURSOME

18 HOLES OF GOLF • HOLE CONTESTS • AWESOME RAFFLE PRIZES • COMPLIMENTARY SNACKS
• GOLFER APPRECIATION GIFTS • GREEN FEES • GOLF CARTS
• DINNER IMMEDIATELY TO FOLLOW AFTER A FUN-FILLED DAY OF GOLF

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GOLFER NAME	EMAIL	PHONE			
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Feam Name:					
Feam Captain Name:	P	Phone:			
Address:	Email: _				
Dity:	State: _	Zip:			
Fotal Due: \$	(Foursomes: \$600	, Individuals, \$150, additional dinners: \$25)			
An invoice will be sent for either check or CC	payment options. Please check if applicable:	☐ Foursome is included in my sponsorship			
Signature:	: Date:				

Please complete the form and return it to Kelly Gollen at kgollen@veca.com.

We will follow up with payment once the form is received.

