



Chautauqua Home Rehabilitation & Improvement Corporation
 2 Academy Street, Mayville, New York 14757-1050
 Phone: 716-753-4650



Sponsorship Request Form

CHRIC CLASSIC 2nd Annual Golf Tournament

Chautauqua Golf Club, 4731 W. Lake Rd., Chautauqua, NY 14722

A Benefit for Chautauqua Home Rehabilitation & Improvement Corporation (CHRIC)

Saturday, July 29, 2017

Sponsorship Levels:

- \$2,000 *TITANIUM \$1,200 *PLATINUM \$750 *GOLD \$550 *SILVER
 \$350 *BRONZE \$250 *GOLF FRIENDS \$125 ACE PUTTING \$100 TEE SIGN
 \$ _____ FRIENDS OF CHRIC (up to \$99) Message: _____

***Please email your company logo for recognition in our publications to: christine_olrogg@chric.org**

Sponsor information as you would like it written in the program and marketing publications-Please Print:

Sponsor (First & Last Name) _____
 Business Name: _____
 Address: _____
 City, State, Zip: _____
 Phone: _____
 Email: _____

Completed Sponsorship Form must be followed by full payment no later than: July 21, 2017

Payment can be made by check, money order (made out to CHRIC) or credit card.

Credit Card: AMEX MASTERCARD VISA DISCOVER
 Credit Card #: _____ Expiry Date: _____ mm/yy 3-digit CVV: _____
 Full Name on Credit Card: _____ Billing Address Zip Code: _____
 Signature: _____

Please Mail competed form to: CHRIC, 2 Academy St., Mayville, NY 14757-1050

Forms may also be faxed or emailed to:

Fax: 716-753-4508 OR Email: christine_olrogg@chric.org

If you are unable to provide support through a monetary donation, items for prizes/auction/raffle would be greatly appreciated and beneficial to the success of this event. Thank you so much for your consideration!



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Sponsorship Entry Form

(Two (2) Foursomes included with Titanium & Platinum Sponsorship)

(One (1) Foursome included with Gold Sponsorship)

(Includes Golf w/Cart, Lunch, Buffet Dinner w/2 Drinks at Chautauqua Golf Club following tournament with awards & prizes.)

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PLEASE PRINT:

Sponsor's Name: _____

FIRST Foursome *(Titanium, Platinum & Gold Sponsorships)*

Team Captain Name: _____ **Cell Phone:** _____

Address: _____

Email Address: _____

Player 2: _____

Player 3: _____

Player 4: _____

SECOND Foursome *(Titanium & Platinum Sponsorships)*

Team Captain Name: _____ **Cell Phone:** _____

Address: _____

Email Address: _____

Player 2: _____

Player 3: _____

Player 4: _____

***Dinner Only Option \$30 Per Person:** For family & friends interested in attending only the Cocktail, Dinner & Awards reception after tournament—How many: _____ Name(s): _____

Please return completed form to CHRIC by: July 21, 2017

CHRIC, 2 Academy St., Mayville, NY 14757-1050

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For more information or questions please contact CHRIC at: 716-753-4650