



41ST ANNUAL
CEDARS GOLF CLASSIC
MONDAY, JUNE 17, 2019

SPONSORSHIP • GOLFER REGISTRATION FORM

SPONSORSHIP OPPORTUNITIES

- | | |
|--|--|
| <input type="checkbox"/> Platinum Sponsor \$25,000 | <input type="checkbox"/> Golf Carts Sponsor \$12,000 |
| <input type="checkbox"/> Gold Sponsor \$20,000 | <input type="checkbox"/> Brunch Sponsor \$6,000 |
| <input type="checkbox"/> Silver Sponsor \$10,000 | <input type="checkbox"/> Cocktail Sponsor \$6,000 |
| <input type="checkbox"/> Golfer Foursome \$5,000 | <input type="checkbox"/> Hole Sponsor (2 courses)..... \$2,000 |

* SPONSORS will have their logo displayed at the event and in associated printed and digital materials. Only a business receipt will be issued.

INDIVIDUAL GOLFERS

- Individual Golfers \$1,250 QTY _____ \$ _____

DONATION ONLY

- I regret that I cannot attend the event, but would like to enclose a donation: \$ * _____
* A tax receipt will be issued for all donations of \$18 or more.

PERSONAL AND BILLING INFORMATION

- Corporate donation Personal donation Invoice

Name: _____

Company: _____
* The tax receipt will be issued to the name or company specified

Address: _____

City: _____ Province: _____ Postal code: _____

Email: _____ Telephone: _____

- VISA MasterCard American Express Cheque* Amount: \$ _____

*Cheque payable to Cedars Cancer Foundation re: Cedars Golf

Cardholder name: _____

* Please note that tax receipt will be issued in card holder's name.

Card number: _____ Expiry date: _____ m | _____ yy

FOURSOME GOLFER NAMES HANDICAP EMAIL TELEPHONE

Group Name: _____

1.			
2.			
3.			
4.			

Please return your payment or address any inquiries to
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