



MONDAY, OCTOBER 28, 2019
Contra Costa Country Club
 801 Golf Club Road ♦ Pleasant Hill, CA

SPONSORSHIP OPPORTUNITIES

LEAD TOURNAMENT SPONSOR	\$10,000
<ul style="list-style-type: none"> Recognized as Tournament Sponsor Name on banner, program, website, social media Full page program ad inside cover Name on 1st tee hole sign Two (2) Foursomes 	
PLATINUM	\$8,000
<ul style="list-style-type: none"> Name on banner, program, website, social media Full page program ad Golf cart signage Name on tee hole sign One (1) Foursome 	
GOLD	\$7,000
<ul style="list-style-type: none"> Golf cart signage on two (2) carts Name in program, website, social media Half page program ad Name on tee hole sign One (1) Foursome 	
SILVER	\$5,000
<ul style="list-style-type: none"> Signage at pre-dinner reception Name in program, website, social media Half page program ad Name on tee hole sign Two (2) player tickets 	
HOSPITALITY	\$3,500
<ul style="list-style-type: none"> Name in program, website, social media One (1) dinner table signage One quarter page program ad Name on tee hole sign One (1) player ticket 	
FAIRWAY	\$2,000
<ul style="list-style-type: none"> Name in program, website, social media One quarter page program ad Name on tee hole sign One (1) player ticket 	
TEE	\$1,000
<ul style="list-style-type: none"> Name on tee hole sign Program recognition 	
PARTNER	\$500
<ul style="list-style-type: none"> Program recognition 	

EVENT EXHIBITORS	Exhibit table during morning registration and evening reception	\$750
INDIVIDUAL PLAYERS	Tee prize, box lunch, dinner reception	\$250
RECEPTION & DINING	Evening reception and dinner only for one (1) guest	\$125

Thank you! Your generous support maximizes communication potential for children and adults through early education, family support, and community audiology services.

SPONSOR INFORMATION

Organization Name: _____

Organization Address: _____

City: _____ **State:** _____ **Zip:** _____

Contact Name: _____ **Email:** _____

Phone: _____

PLAYER REGISTRATION (\$250 per individual player)

Player #1

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Email: _____

Phone: _____

Player #2

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Email: _____

Phone: _____

Player #3

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Email: _____

Phone: _____

Player #4

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Email: _____

Phone: _____

PAYMENT INFORMATION

Sponsorship Level _____ Amount \$ _____

Player Registration(s) \$250 X _____ number of players Amount \$ _____

Player Registration(s) \$1,000 X _____ foursome team(s) Amount \$ _____

Reception & Dinner only \$125 X _____ number of guests Amount \$ _____

Exhibitor \$750 each Amount \$ _____

Additional Donation Amount \$ _____

TOTAL PAYMENT AMOUNT \$ _____

Check made out to "CEID" and sent with form to CEID, 1035 Grayson Street, Berkeley, CA 94710.

Credit

Check

Cash

Credit Card Type: _____ Number: _____ Exp Month/Year _____

Your Signature: _____ Date _____

*For more information, Call: 510-848-4800, ext 320, or email development@ceid.org
CEID is a 501c3 nonprofit organization. Contributions are tax-deductible to the full extent of the law.
CEID's Federal Tax ID number is 94-2914703*