



16th Annual KACC Scholarship Golf Outing Monday, June 10th Sponsor Commitment Form

Company: _____
Address: _____
City: _____ State: _____ Zip: _____
Contact Name: _____ Phone: _____
Fax #: _____ Email: _____

Prize Sponsor: Description of prize: _____

- ☐ **Birdie Hole Sponsor** **\$125**
Includes signage for teebox or green, opportunity to distribute promotional items on hole assigned, recognition on promotional materials.
- ☐ **Director's Breakfast or Awards Lunch Sponsor** **\$200 (Four Available)**
Includes signage for your business at registration area, on all promotional materials, and again at scholarship awards ceremony. Table at registration area provides you an opportunity to distribute promotional materials. You will receive recognition at breakfast and complimentary breakfast tickets for two individuals.
- ☐ **Cart Sponsor** **\$300 (Two Available)**
Includes signage for your business on each golf cart assigned to the outing and on all promotional materials and recognition at awards ceremony.
- ☐ **Refreshment Sponsor** **\$300 (Four Available)**
Includes signage on roaming refreshment carts on course, in the 19th hole of clubhouse will be assigned a Par-3 Hole for our staff to distribute promotional materials for your business. Complimentary breakfast ticket for two individuals.
- ☐ **Clubhouse Sponsor** **\$600 (Four Available)**
Includes golf, breakfast and awards lunch for four players, recognition and signage at registration and in the clubhouse, as well as on all promotional materials and again at scholarship awards ceremony; table set up and opportunity to distribute promotional items at registration area, recognition at event.

Complimentary Clubhouse Sponsor Golfers (or to add golfers to your sponsorship at \$100 per golfer), please list golfer names:

Golfer #1 _____ (captain) Golfer #3 _____
Golfer #2 _____ Golfer #4 _____

Total Payment \$ _____ Method of Payment: _____ Check Enclosed _____ Credit Card
If paying by credit card: _____ Visa _____ MasterCard
Card Number: _____ Exp. Date: _____
Name on Card: _____ Authorized Signature: _____

Detach and return this registration form and payment to:
Kankakee Area Career Center
Attn: Golf Committee
P.O. Box 570, Bourbonnais, IL 60914
(Make checks payable to *Kankakee Area Career Center*)