

TRANSITIONS CHILDREN'S SERVICES



**Online Registration Available!**

[www.transitionschildrenservices.org](http://www.transitionschildrenservices.org)

**MONDAY, OCT. 14, 2019**

Belmont Country Club

8253 E. Belmont Ave.

Fresno, CA 93727

## GOLF TOURNAMENT Sponsorship Packages

### Platinum (Social Worker) Level Sponsor - \$3,000

- Two Foursomes (includes green fees, cart, lunch and dinner)
- \$5,000 worth of tournament promotional advertising on KMPH/KFRE – name and company logo
- Name and logo displayed prominently on sponsor banner
- Company banner displayed at the tournament
- Awards Ceremony Recognition – company representative to speak if desired

### Gold (Foster Parent) Level Sponsor - \$2,000

- One Foursome (includes green fees, cart, lunch and dinner)
- \$5,000 worth of tournament promotional advertising on KMPH/KFRE – company logo only
- Name and logo displayed on sponsor banner
- Company banner displayed at tournament
- Company information/promotional materials in gift bags

### Silver (Mentor) Level Sponsor - \$1,000

- One Foursome (includes green fees, cart, lunch and dinner)
- Name and logo displayed on sponsor banner
- Company information/promotional materials in gift bags

### Bronze (Advocate) Level Sponsor - \$600

- One Foursome (includes green fees, cart, lunch and dinner)
- Signage on a tee box
- Name recognition on tournament banner

### Tee Sponsor - \$100

- Signage on a tee box
- Name recognition on tournament banner



**\* Be our Hero and Title Sponsor of the event,  
contact Brian Van Anne at Transitions Children's Services if interested (559) 222-5437**



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**FOR MORE INFORMATION OR TO REGISTER:**

Transitions Children's Services  
(559) 222-5437

**4 Person Scramble - \$125 per player  
Lunch and Dinner included**

**TOURNAMENT SCHEDULE**

10:30 A.M. - Check in/Lunch  
12 P.M. - Shotgun Start  
5 P.M. - Dinner and Awards

Net proceeds to benefit Transitions Children's Services

**PRIZES**  
1st Place Team  
2nd Place Team  
Last Place Team  
Closest to the Pin  
Longest Drive

**PLAYER REGISTRATION** 4-player scramble; We encourage you to form your own team, however teams not required.

Name: \_\_\_\_\_ Name: \_\_\_\_\_  
Address: \_\_\_\_\_ Address: \_\_\_\_\_  
Phone: \_\_\_\_\_ Email: \_\_\_\_\_ Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Name: \_\_\_\_\_ Name: \_\_\_\_\_  
Address: \_\_\_\_\_ Address: \_\_\_\_\_  
Phone: \_\_\_\_\_ Email: \_\_\_\_\_ Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Check (payable to Transitions Children's Services)  MC  VISA

Amount \$ \_\_\_\_\_ + \_\_\_\_\_  
Card No. \_\_\_\_\_  
Exp. Date: \_\_\_\_\_ CVV: \_\_\_\_\_  
Name on card: \_\_\_\_\_  
Signature: \_\_\_\_\_

