



Cordially invites you to participate in our

2011 Community Cup Golf Classic

October 4th, 2011

Washington Golf and Country Club 3017 North Glebe Road, Arlington, VA 22207



Format

- Captain's Choice (Scramble/Super Ball)
- Foursomes may be men, women, or mixed

Schedule

- Lunch at Noon
- Shotgun start at 1 p.m.
- Cocktails, Buffet, and Awards Ceremony at 6 p.m.

Prizes

- First, Second, and Third Place Foursome
 - Men's and Women's Longest Drive
 - Men's and Women's Closest to the Pin

Arlington Community Foundation 15th Annual Community Cup Golf Classic

Name _____

Company _____

Address _____

Phone _____

E-Mail _____

Golfers	Handicap
* _____	_____
_____	_____
_____	_____
_____	_____

*Team Captain & Contact Person

• If you do not have a foursome, we will place you in one.

• Golfers without a handicap will be assigned one.

Please check if you wish to sponsor but **DO NOT** wish to play golf

To be listed in promotional materials, please RSVP no later than July 25, 2011

Questions? Call 703.243.4785 or visit www.arlcf.org

Open Bar Sponsor (\$5,000) Includes TWO foursomes for golf with all of the Team Sponsor benefits below, PLUS additional signage with special recognition.

Lunch Sponsor (\$5,000) Includes TWO foursomes for golf with all of the team sponsor benefits below PLUS additional signage and special recognition.

Men's and Women's Closest to the Pin Award Sponsor (\$3,500) Includes one foursome for golf with all the Team Sponsor benefits below, PLUS additional signage and special recognition.

Men's and Women's Longest Drive Award Sponsor (\$3,500) Includes one foursome for golf with all the Team Sponsor benefits below, PLUS additional signage and special recognition.

Course Beverage Station Sponsor (\$3,500) Includes one foursome for golf with all of the Player benefits below, PLUS additional signage and special recognition.

2011 Team Sponsor (\$2,900) Includes golf cart, lunch, cocktails, buffet, awards and prominent recognition.

Individual Player (\$375) Includes golf cart, lunch, cocktails, buffet, and awards.

\$_____ Total _____ Check Enclosed

*Please make checks payable to **Arlington Community Foundation***

Please charge to my: Visa MasterCard American Express

Account no. _____ Exp. Date _____

Name of account holder _____

Signature of account holder _____

Mail or fax to: Arlington Community Foundation
818 North Quincy Street, Suite 103, Arlington, VA 22203