

2013 REGISTRATION FORM

Construction Industry Legacy Golf Tournament

**“Ike Course” • Pacific Palms Hotel & Conference Center • One Industry Hills Parkway • City of Industry
Monday, May 20, 2013 • 8:00 AM - Golf Registration • 10:00 AM - Shotgun Start • 3:00 PM - Reception & Award Ceremony**

Tournament Sponsor.....\$10,000
Two foursomes with eight tee packages
BBQ lunch, snacks and beverages on-course and reception
Company banner displayed
Full-page cover ad in tournament journal
Two tee or green signs
Recognition as Tournament Sponsor

Reception Sponsor.....\$7,500
Two foursomes with eight tee packages
BBQ lunch, snacks and beverages on-course and reception
Full-page cover ad in tournament journal
One tee or green sign
Recognition as Reception Sponsor

Golf Cart Sponsor.....\$5,000
One foursome with four tee prize packages
BBQ lunch, snacks and beverages on-course and reception
Signage on golf cart including company name
Full-page ad in tournament journal
Recognition as Golf Cart Sponsor

Tee Package Sponsor.....\$5,000
One foursome with four tee prize packages
BBQ lunch, snacks and beverages on-course and reception
One tee or green sign
Full-page ad in tournament journal
Recognition as Tee Package Sponsor

Award Sponsor.....\$3,000
One foursome with four tee prize packages
BBQ lunch, snacks and beverages on-course and reception
One tee or green sign
Full-page ad in tournament journal
Recognition as Award sponsor

Lunch Sponsor..... \$3,000
One foursome with four tee prize packages
BBQ lunch, snacks and beverages on-course and reception
One tee or green sign
Full-page ad in tournament journal
Recognition as Lunch Sponsor

Refreshment Sponsor..... \$3,000
One foursome with four tee prize packages
BBQ lunch, snacks and beverages on-course and reception
One tee or green sign
Recognition as Refreshment Sponsor

Scouting Foursome.....\$2,000
One foursome with four tee prize packages
BBQ lunch, snacks and beverages on-course and reception

Individual Golfer.....\$500
One round of golf with one tee prize package
BBQ lunch, snacks and beverages on-course and reception

Green/Tee Sponsor.....\$500
Half page ad in tournament journal
One tee or green sign

Donation.....\$ _____
Sorry, I cannot attend the tournament, but would like to support Scouting in the San Gabriel Valley. Please accept my 100% tax-deductible contribution.

Please provide ad artwork in JPEG or PDF format (high resolution) to annette.haslam@scouting.org by May 6, 2013. If you have further questions, please contact Annette Haslam at (626) 351-8815 ext. 255. Ad size is 4.5”w X 7.5”h.

PAYMENT Visa MasterCard Discover American Express Check Enclosed **Amount \$** _____

NAME _____ **TITLE** _____

COMPANY _____

ADDRESS _____

CITY, STATE, ZIP _____

PHONE _____ **FAX** _____ **E-MAIL** _____

CARD NO # _____ **V CODE** _____ **EXP. DATE** _____

SIGNATURE _____

PRINTED NAME _____

You may mail, e-mail to annette.haslam@scouting.org, or fax this form to (626) 351-5049.
For more information call (626) 351-8815 ext. 255 or visit our website at www.sgvcbosa.org.

Checks should be made payable to: San Gabriel Valley Council, BSA, 3450 East Sierra Madre Boulevard, Pasadena, California 91107

SAN GABRIEL VALLEY COUNCIL, BOY SCOUTS OF AMERICA
2013 CONSTRUCTION INDUSTRY LEGACY GOLF TOURNAMENT
 Pacific Palms Hotel & Conference Center
 One Industry Hills Parkway
 City of Industry, California

Monday, May 20, 2013

Please complete all information requested below for each participating golfer and FAX, mail or e-mail to:

San Gabriel Valley Council, Boy Scouts of America
 Attention: Annette Haslam
 3450 E. Sierra Madre Blvd., Pasadena, California 91107-1934
 Phone (626) 351-8815, ext 255 Fax: (626) 351-5049 E-mail: annette.haslam@scouting.org

PLEASE RETURN AS SOON AS POSSIBLE

GOLFER # 1

NAME:	TITLE:
COMPANY:	PHONE:
ADDRESS:	FAX:
CITY:	STATE/ZIP:
HANDICAP _____ INDEX _____ AVERAGE SCORE _____	E-MAIL:

GOLFER # 2

NAME:	TITLE:
COMPANY:	PHONE:
ADDRESS:	FAX:
CITY:	STATE/ZIP:
HANDICAP _____ INDEX _____ AVERAGE SCORE _____	E-MAIL:

GOLFER # 3

NAME:	TITLE:
COMPANY:	PHONE:
ADDRESS:	FAX:
CITY:	STATE/ZIP:
HANDICAP _____ INDEX _____ AVERAGE SCORE _____	E-MAIL:

GOLFER # 4

NAME:	TITLE:
COMPANY:	PHONE:
ADDRESS:	FAX:
CITY:	STATE/ZIP:
HANDICAP _____ INDEX _____ AVERAGE SCORE _____	E-MAIL:

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