

Sponsorship Opportunities

GOLD - \$3,500

- Recognition as Gold Sponsor
- Recognition at Awards
- Hole and Tee Sponsorship
- Recognition in the Electronic Program
- Promotional Information in Giveaway Bags
- Two Sponsored Foursomes in Golf Outing
- Banner on the Course

SILVER - \$2,500

- Recognition as Silver Sponsor
- Recognition at Awards
- Hole or Tee Sponsorship
- Recognition in the Electronic Program
- Promotional Information in Giveaway Bags
- Two Sponsored Foursomes in Golf Outing

BRONZE - \$1,500

- Recognition as Bronze Sponsor
- Hole or Tee Sponsorship
- Recognition in the Electronic Program
- Promotional Information in Giveaway Bags
- One Sponsored Foursome in Golf Outing

PUTTING CHALLENGE - \$1,000

SCORECARD - \$500

HOLE OR TEE - \$100

Questions

Contact Sue Hicks at (814) 664-4641 or
email shicks@corryhospital.com

L|E|C|O|M HEALTH
CORRY MEMORIAL HOSPITAL

965 Shamrock Lane
Corry, PA 16407

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Corry Memorial Hospital

G *Classic* **OLF**



North Hills Golf Course

Wednesday, September 14, 2022
10 a.m. Shotgun Start

Corry Memorial Hospital (CMH), an affiliate of LECOM Health, provides programs and services such as 3D mammography, oncology, DEXA Scans, rehabilitation, hunter safety screenings, educational opportunities and more to better serve our community. It is our hope that you will help us continue the excellent care our community enjoys by supporting this year's event! You can assist our efforts by choosing from sponsorships, advertising or golf. Make your selection on the attached form.

Proceeds from the event benefit Corry Memorial Hospital.

North Hills Golf Course

1450 North Center Street, Corry, PA

Schedule

9 a.m. Registration
10 a.m. Shotgun Start
Awards to follow

Format: Four-Person Scramble

Entry Fee: \$400/foursome or \$100/person

Price Includes:

Golf Cart	Refreshments
Greens Fee	Food on the Course
Gift Bag	Skill Prizes

Prizes

TEAM

1st, 2nd, and 3rd Place
1st, 2nd, and 3rd Place Mixed Group

INDIVIDUAL

Closest to the Pin/Longest Putt
Men's and Women's Longest Drive
Putting Challenge, 50/50 and Skins

Registration

Mail this completed registration form to:
Sue Hicks, CMH, 965 Shamrock Lane, Corry, PA, 16407

FOURSOME - \$400

- _____
- _____
- _____
- _____

INDIVIDUAL - \$100

- _____

Sponsorship Information

If you wish to be a sponsor, please check the level of sponsorship below.

- | | |
|---|--|
| <input type="checkbox"/> Gold \$3,500 | <input type="checkbox"/> Putting Challenge \$1,000 |
| <input type="checkbox"/> Silver \$2,500 | <input type="checkbox"/> Scorecard \$500 |
| <input type="checkbox"/> Bronze \$1,500 | <input type="checkbox"/> Hole or Tee \$100 |

Company Name: _____

Address: _____

City/State/Zip: _____

Phone: _____

Email: _____

Contact Person: _____

Check enclosed made payable to **Corry Memorial Hospital**
CMH is a 501(c)(3) corporation and donations are tax deductible.

Invoice Me

Credit Card # _____

Exp. Date: _____

Signature: _____

