### Golisano Children's Hospital
#### 2024 Golf Classic Sponsor Opportunities

**Monday, September 9, 2024**

**Monroe Golf Club, and Oak Hill West & East Course**

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**PRESENTING SPONSOR**

$30,000

- Four Foursomes (Two at Oak Hill East & two at Oak Hill West or Monroe)
- Company logo prominently displayed on all printed materials and on all participant giveaways
- Company name listed on website
- Full page color recognition on inside front or back cover and company listed as presenting sponsor on program cover
- Name listed as presenting sponsor on all signage including, tee signs, major sponsor banner, dinner table tents
- Commemorative plaque
- Name listed in Strong Kids newsletter (circ. 14,000)

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**PLATINUM SPONSOR**

$18,000

- Three foursomes (One at Oak Hill East & two at Oak Hill West or Monroe)
- Full page color recognition and company listed as major sponsor on program cover
- Name listed as platinum sponsor on sponsor sign, tee signs, major sponsor banner, dinner table tents
- Commemorative plaque
- Name listed in Strong Kids newsletter (circ. 14,000)

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**GOLD (DINNER) SPONSOR**

$12,000

- Two foursomes (One at Oak Hill East & one at Oak Hill West or Monroe)
- Full page color recognition in tournament program
- Name listed on sponsor sign, tee sign, major sponsor banner, and dinner table tents
- Name listed in Strong Kids newsletter (circ. 14,000)

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**SILVER SPONSOR**

$10,500

- Two foursomes (One at Oak Hill East & one at Oak Hill West or Monroe)
- Full page color recognition in tournament program
- Name listed on sponsor sign and tee sign displayed at tournament
- Name listed in Strong Kids newsletter (circ. 14,000)

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**LUNCH or 19th HOLE SPONSOR**

$5,800  $6,200  $6,500

Monroe Oak Hill West Oak Hill East

- One foursome
- Full page color recognition in tournament program
- Name listed on sponsor sign and tee sign displayed at tournament
- Company name listed on lunch signage
- Name listed in Strong Kids newsletter (circ. 14,000)

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**BLUE SPONSOR**

$4,500  $5,000  $5,500

Monroe Oak Hill West Oak Hill East

- One foursome
- Half page color recognition in tournament program
- Name listed on sponsor sign and tee sign displayed at tournament
- Name listed in Strong Kids newsletter (circ. 14,000)

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**WHITE SPONSOR**

$4,000  $4,500  $5,200

Monroe Oak Hill West Oak Hill East

- One foursome (Limited to one foursome per company on East Course)
- Name listed in tournament program
- Name listed on sponsor sign displayed at tournament

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**TEE SPONSOR**

$1,000

- Company name displayed on tee at the event
- Name listed on sponsor sign displayed at tournament
- Listing in tournament program

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11am - Lunch & Registration
12:15pm - Shotgun start
*Dinner immediately following play at Monroe Golf Club (approximately 5pm)*

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*The 'IRS goods and services' non-tax deductible amount per foursome is $1,700 if playing at Monroe, and $2,700 playing at Oak Hill East and West.*
Yes, I will support the Golisano Children's Hospital Classic Golf Tournament to be held at Oak Hill East, Oak Hill West, & Monroe Golf Club on Monday, September 9, 2024 as follows:

- **$30,000** PRESENTING
- **$12,000** GOLD/DINNER
- **$5,800/$6,200/$6,500** LUNCH
  - Monroe
  - West
  - East
- **$4,000/$4,500/$5,200** WHITE
  - Monroe
  - West
  - East
- **$18,000** PLATINUM
- **$10,500** SILVER
- **$4,500/$5,000/$5,500** BLUE
  - Monroe
  - West
  - East
- **$5,800/$6,200/$6,500** LUNCH
  - MONROE
  - WEST
  - EAST
- **$4,000/$4,500/$5,200** WHITE
  - MONROE
  - WEST
  - EAST

*The IRS goods and services non-tax deductible amount per foursome is $1,700 if playing at Monroe, $2,700 at Oak Hill West & East.*

(Reservations recommended by July 1, 2024. Foursomes will be scheduled on a first come, first serve basis)

**Course Preference:**
- [ ] Oak Hill East
- [ ] Oak Hill West
- [ ] Monroe

**Business Name:** __________________________

**Contact Name:** __________________________

**Street:** __________________________

**City:** __________ **State:** ______ **Zip:** __________

**Phone:** ________________ **Email:** __________________

- [ ] Check Enclosed (Make payable to Golisano Children's Hospital)
- [ ] Please bill me
- [ ] Please charge my credit card (Mastercard, Visa, Discover, Amex)
  - **Name on Card:** __________________________
  - **Card #:** __________________________ **Exp. Date:** ______

Protecting your sensitive information is a high priority. To pay by credit card, please call (585) 208-3546.

*Presenting, Platinum, Gold, Silver, Lunch, Blue and White Sponsor: Please fill in names of the golfers in your foursome(s):

1. __________________________
2. __________________________
3. __________________________
4. __________________________

MAIL or EMAIL to Betsy Findlay
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