

REGISTRATION & SPONSORSHIP FORM

**The 10th Annual R.D. Olson Construction Charity Golf Tournament
April 22nd, 2019 – Oak Creek Golf Club, Irvine**

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| <p><input type="checkbox"/> \$6000 – DIAMOND SPONSOR</p> <ul style="list-style-type: none"> • Three golf foursomes • Catered lunch, drinks on course & dinner • Company name on all press & print materials • Company name on all electronic materials • Company name on banner • Tee & green signage on course • Special on-stage recognition at dinner <p><input type="checkbox"/> \$4000 – GOLD SPONSOR</p> <ul style="list-style-type: none"> • Two golf foursomes • Catered lunch, drinks on course & dinner • Company name on all print materials • Company name on all electronic materials • Tee/green signage on course • Recognition at dinner | <p><input type="checkbox"/> \$2500 – LUNCH or 19th HOLE SPONSOR</p> <ul style="list-style-type: none"> • One golf foursome • Catered lunch, drinks on course & dinner • Tee sign & company name in program • Company name on all electronic materials • Recognition at dinner <p><input type="checkbox"/> \$2150 – SILVER SPONSOR</p> <ul style="list-style-type: none"> • One golf foursome • Catered lunch, drinks on course & dinner • Tee sign & company name in program <p><input type="checkbox"/> \$600 – INDIVIDUAL GOLFER</p> <ul style="list-style-type: none"> • Green fee & cart • Catered lunch, drinks on course & dinner <p><input type="checkbox"/> \$250 – TEE/GREEN SPONSOR</p> <ul style="list-style-type: none"> • Tee/green signage on course |
|---|--|

SPONSORSHIP INFORMATION

Company: _____	
Address: _____	
Contact Name: _____	
Email: _____	Phone: _____
TOTAL AMOUNT ENCLOSED \$ _____	
<input type="checkbox"/> Enclosed is my check payable to: Pediatric Cancer Research Foundation or PCRF Tax-exempt ID #95-3772528 (IRS/fair market value is \$100 per person) 17932 Sky Park Circle, Suite E Irvine, CA 92614	
<input type="checkbox"/> Please charge my credit card: <input type="checkbox"/> Visa <input type="checkbox"/> MC <input type="checkbox"/> AMEX	
Card #: _____	Exp Date: _____
Name on card: _____	Signature: _____

PLAYER INFORMATION

Player 1: _____	Email: _____
Player 2: _____	Email: _____
Player 3: _____	Email: _____
Player 4: _____	Email: _____

Please return this form with your payment to: **R.D. Olson Construction, Attention Tim Cromwell**
 2955 Main Street, Third Floor, Irvine, CA 92614
 Tel: (949) 474-2001 • Fax: (949) 623-6752 • www.rdolson.com/golf