



American Red Cross

# 12th Annual Golf Classic Sponsorship & Player Registration Form

Please mail your registration form with payment or register online at [www.redcrosslb.org](http://www.redcrosslb.org) by September 18, 2010.

## I would like to purchase single golfers, foursomes or banquet tickets:

1

- Single Golfers: \_\_\_\_ x \$225 = \$ \_\_\_\_
- Banquet ticket: \_\_\_\_ x \$50 = \$ \_\_\_\_
- Foursomes: \_\_\_\_ x \$800 = \$ \_\_\_\_

## I would like to purchase an ad at the following rates:

- Full Page Ad            5.5 x 8.5 inches            \$500
- Half Page Ad            5.5 x 4.25 inches            \$300

*Ad space reservations and camera ready artwork must be received by September 25, 2009*

## I would like to purchase a tee or green sponsorship at the following rates:

- \$300 Tee Sponsor
- \$200 Green Sponsor

## I would like to purchase a challenge prize raffle ticket at the following rate:

- Raffle Ticket \_\_\_\_ x \$25 = \$ \_\_\_\_
- 5 Raffle Tickets \_\_\_\_ x \$100 = \$ \_\_\_\_

***Three chances to win. Three iPads will be raffled off***

*Raffle ticket stub will be mailed to you before the tournament. Need not be present to win.*

## 2 Sponsor/Ad/Ticket Information

Name: \_\_\_\_\_ Company: \_\_\_\_\_

Signage Should Read: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

## 3 Payment Information

- Golfer Total            \$ \_\_\_\_
  - Banquet Ticket Total    \$ \_\_\_\_
  - Ad Total                \$ \_\_\_\_
  - Sponsorship Total      \$ \_\_\_\_
  - Raffle Ticket Total      \$ \_\_\_\_
  - Grand Total             \$ \_\_\_\_
- Please charge to my credit card:
- Name on card: \_\_\_\_\_
- Credit Card Number: \_\_\_\_\_
- Expiration: \_\_\_\_/\_\_\_\_            Security Code: \_\_\_\_\_
- Signature: \_\_\_\_\_
- Check enclosed made out to American Red Cross

Please mail or fax to:

Attn: Margaret Arbini-Madonna  
 American Red Cross  
 3150 E. 29th Street  
 Long Beach, CA 90806  
 Phone (562) 490-4002  
 Fax (562) 424-0385  
 Email to [ArbiniM@usa.redcross.org](mailto:ArbiniM@usa.redcross.org)

## 4 Please fill out player information on other side →

## 4 Player Information

### Scramble Format:

Basic scramble with a slight twist! At least 3 drives from each team member must be used during the round.

#### Golfer One

Name: \_\_\_\_\_

Company: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_

Email: \_\_\_\_\_

#### Golfer Two

Name: \_\_\_\_\_

Company: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_

Email: \_\_\_\_\_

#### Golfer Three

Name: \_\_\_\_\_

Company: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_

Email: \_\_\_\_\_

#### Golfer Four

Name: \_\_\_\_\_

Company: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_

Email: \_\_\_\_\_

Remember to register by September 18th. Register online at [www.redcrosslb.org](http://www.redcrosslb.org)!

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