

The Foundation of Collier County Medical Society presents

Docs & Duffers 2020

SUPPORT OPPORTUNITIES

7th Annual Charity Golf Tournament benefiting scholarships for future medical professionals and funding to local healthcare programs in need

Saturday, Sep. 26, 8:00am Tiburón Golf Club

Sponsorships

Presenting Sponsor: \$4000 (limit 1)

- 1 foursome and 2 additional golfers (6 total)
- 2 lunch tickets
- Exhibit table at registration and and at a tee
- Dedicated signage at registration and lunch
- Logo in top position on digital & printed materials
- 2-3 minute speaking opportunity during welcome remarks
- One ½ page editorial in CCMS member magazine and a spotlight in e-newsletter
- Name in press releases and media promotions
- Opportunity to place brochures/giveaways in box lunches or goodie bags

Ace Sponsor: \$2500 (limit 2)

- 1 foursome and 2 additional lunch tickets
- Exhibit table at tee or registration (*choose 1*)
- Signage at registration and lunch
- Logo in second position on digital & printed materials
- 1-2 minute speaking opportunity during welcome
- Spotlight in CCMS member magazine and e-newsletter
- Name in press releases and media promotions
- Opportunity to place brochures/giveaways in box lunches or goodie bags

Eagle Sponsor: \$1750 (limit 4)

- 1 foursome and 1 additional lunch ticket
- Exhibit table at tee or hole sign (*your choice*)
- Logo on digital & printed materials
- 1-2 minute speaking opportunity at registration
- Logo in CCMS member magazine
- Opportunity to place brochure/giveaway in goodie bags

Birdie Sponsor: \$1250

- 1 foursome
- Exhibit table at tee or hole sign (*your choice*)
- Logo or name (*as space allows*) on digital & printed materials
- Verbal acknowledgment at event
- Name in CCMS member magazine
- Opportunity to place brochure/giveaway in goodie bags

Hole Sponsor: \$550

- 2 lunch tickets
- Exhibit table at tee or hole sign (*your choice*)
- Name on marketing materials as space allows
- Opportunity to place brochure/giveaway in goodie bags

Underwriting

Contact CCMS for benefits & availability:
april@ccmsonline.org or 239-435-7727

Breakfast Supporters: \$300 and up

Beverage Supporters: \$300 and up

Goodie Bag Sponsor: \$1000-\$1200

Golfer Gift Bag Items: from \$250 and up

Bottled Water Sponsors

Golf Ball Sponsor

Golf Umbrella Sponsor

or, suggest your own give-away
(120 items, subject to approval)

**Donate an Award, Raffle Prize,
or Auction Item**

Golfer Fees

\$185/golfer or \$680/foursome
includes cart & greens fees, goodie bag,
refreshments, and awards luncheon

**Mulligans & Hole Contests Available
Foursome & Individual Awards**



www.ccmsonline.org/foundation

The Foundation of Collier County Medical Society

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7th Annual Charity Golf Tournament

Saturday, September 26th • Tiburón Golf Club

Sponsorships are first-come, first-served. Complete the form below and return to the Foundation of CCMS:

fax: (239) 435-7790 • email: info@ccmsonline.org • mail: 88 12th St N, Unit 200, Naples FL 34102

Individual golfers and foursomes deadline is September 18, 2020 – you can also register & pay at ccmsfoundation.org

Call CCMS at 239-435-7727 for more information

Company: _____ Phone: _____

Contact: _____ Address: _____

E-mail: _____ City/State/Zip: _____

Please select your sponsorship level:

___ Presenting Sponsor \$4000

___ Ace Sponsor \$2500

___ Eagle Sponsor \$1750

___ Birdie Sponsor \$1250

___ Hole Sponsor \$550

___ Foursome Only \$680 Qty: ___

___ I am interested in underwriting opportunities

___ I am interested in providing prize items

___ Mulligans: \$30 for 2/person or \$20 for 1/person -- Qty of 2-packs: ___ Qty of single mulligans: ___

Golfer Names (does not apply to Hole sponsors)

Player 1: _____

Player 2: _____

Player 3: _____

Player 4: _____

Player 5: _____

Player 6: _____

Player 7: _____

Player 8: _____

PAYMENT INFORMATION

Make checks payable to the Foundation of Collier County Medical Society.

A portion of your donation may be tax deductible within IRS guidelines - consult with your tax advisor.

Total \$ _____ ___ Check enclosed ___ Visa ___ MasterCard ___ American Express

Card #: _____ Expiration Date: _____

Name on Card: _____

Billing Address: _____

Signature of Cardholder: _____

The Foundation of Collier County Medical Society, Inc. is a 501(c) (3) organization, State of Florida Registration No. CH38165. Tax ID No. 46-1391700.

A COPY OF THE OFFICIAL REGISTRATION AND FINANCIAL INFORMATION MAY BE OBTAINED FROM THE DIVISION OF CONSUMER SERVICES BY CALLING TOLL-FREE 1-800-435-7352. REGISTRATION DOES NOT IMPLY ENDORSEMENT, APPROVAL OR RECOMMENDATION BY THE STATE.