

# SPONSORSHIP OPPORTUNITIES

## Platinum Sponsor: \$10,000

Name in event title—ie, Golf & Give Back with the Red Shoe Society presented by X Company; entry for 5 foursomes; name/logo on golf carts and all event collateral; prominent on-course signage; recognition on LBRMH website; recognition in one quarterly LBRMH newsletter; invitation to annual LBRMH donor reception; 12 additional invitations to dinner reception; and speaking opportunity at the dinner reception.

## Gold Sponsor: \$5,000

Entry for 3 foursomes; name/logo on golf carts and event collateral; prominent on-course signage; recognition on LBRMH website; recognition in one quarterly LBRMH newsletter; invitation to annual LBRMH donor reception; and 6 additional invitations to dinner reception.

## Silver Sponsor: \$2,500

Entry for 2 foursomes; name/logo on golf carts and event collateral; recognition on LBRMH website; recognition in one quarterly LBRMH newsletter; invitation to annual LBRMH donor reception; 4 additional invitations to the dinner.

## Bronze Sponsor: \$1,000

Entry for 1 foursome; name/logo on golf carts and event collateral; recognition on LBRMH website; recognition in one quarterly LBRMH newsletter; invitation to annual LBRMH donor reception; 2 additional invitations to dinner.

## Foursome: \$600 • Individual Golfer: \$150 • \$125 for Red Shoe Society Member

Entry for 1 golfer; includes green fee, cart fee, range balls, lunch and dinner reception.

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

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

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

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

### **I would like to commit to the following:**

- Platinum Sponsor: \$10,000     Gold Sponsor: \$5,000     Silver Sponsor: \$2,500  
 Bronze Sponsor: \$1,000     Individual Golfer: \$150     Individual Golfer (RSS member): \$125  
 I am unable to attend, but please accept my tax-deductible donation to benefit the LBRMH

### **Payment Information:**

- Tax-deductible check enclosed in the amount of \$ \_\_\_\_\_ Payable to: LBRMH  
 Credit Card Number: \_\_\_\_\_ Exp Date: \_\_\_\_\_  
Payment Amount: \$ \_\_\_\_\_ Name on CC: \_\_\_\_\_

**Mail this form w/payment:** Michelle Daley - 500 E. 27th Street, Long Beach, CA 90806;  
mdaley@rmhsc.org Fax: 562.285.4399; Main line: 562.285.4308; Tax ID: 95-3167869