

Monday, June 9, 2025

Knoll Country Club West 990 Greenbank Road Boonton, NJ 07005

Lunch at **11 a.m.**Shotgun start at **noon**Dinner at **5:30 p.m.** 

Proceeds benefit Christian Health's 2025 Annual Fund to support areas of greatest need. This includes our capital enhancements, expansion of our mental health services, and advancing our technology to optimize care delivery.

### **Golfing Sponsorship Opportunites**

All sponsorships get a company logo/link on Christian Health's website and pre- and post-event publicity.

Benefits	Master Golf Sponsor <b>\$10,000</b>	Classic Sponsor <b>\$7,500</b>	Front/Back Nine Sponsor <b>\$5,000</b>	Eagle Sponsor <b>\$3</b> ,500	Birdie Sponsor <b>\$2,000</b>
Golfers	Two foursomes	Foursome	Foursome	Foursome	Twosome
Signage	18 holes, golf carts, and dinner	18 holes	9 holes	1 hole	1 hole
Promotional Item	To be included in golfer goody bag (optional)				

## **Other Sponsorship Opportunities**

- **Dinner Sponsor \$4,000**Premier signage at dinner and bar
- Barbecue Lunch Sponsor \$3,000 Premier signage at lunch and bar
- Health and Wellness Sponsor \$2,500
   Premier signage at registration and lunch
- Golf Cart Sponsor \$2,000 Signage on all golf carts

- **Beverage Sponsor \$1,750**Signage at halfway house and beverage carts
- Putting Contest Sponsor \$1,500 Premier signage at putting green
- **Driving Range Sponsor \$1,000**Premier signage at driving range
- Skills Sponsor \$500 Signage at specific hole



# **Select Your Participation Level**

18-hole Golf Package \$350/pp x = \$	☐ Dinner Sponsor - <b>\$4,000</b>
□ Dinner only \$60/pp x = \$	☐ Barbecue Lunch Sponsor - <b>\$3,000</b>
☐ Master Golf Sponsor - <b>\$10,000</b>	☐ Health and Wellness Sponsor - <b>\$2,500</b>
Classic Sponsor - \$7,500	Golf Cart Sponsor - <b>\$2,000</b>
Front/Back Nine Sponsor - \$5,000	Beverage Sponsor - <b>\$1,750</b>
☐ Eagle Sponsor - <b>\$3,500</b>	☐ Putting Contest Sponsor- <b>\$1,500</b>
☐ Birdie Sponsor - <b>\$2,000</b>	Driving Range Sponsor - <b>\$1,000</b>
	Skills Sponsor - <b>\$500</b>

Please complete this section and return it with your payment to:

Christian Health Foundation 301 Sicomac Avenue | Wyckoff, NJ 07481 or register online at **ChristianHealthNJ.org** 

## Registration

NAME	_
COMPANY NAME	—
ADDRESS	
CELL PHONE/WORK PHONE	—
EMAIL	

### Payment

Ш	\$ in honor of Christian Health's 2025 Annual Fund			
	A check for \$ is included. (Payable to Christian Health Foundat	ion)		
CAF	AD#			
EXP	IRATION DATE	CVV		
NAN	IE ON CREDIT CARD			

#### Thank you for supporting Christian Health!