



Sacramento Chapter 55th Annual GOLF TOURNAMENT

SPONSOR REGISTRATION FORM

Get ready to hit the links **Monday, Aug. 20** for our chapter's annual golf tournament, held this year at **Granite Bay Golf Club**. Shotgun start is 11 a.m. As this tournament is one of the primary sources of funds for our chapter's scholarship program, **sponsors are needed!** Your firm/company will receive recognition during the tournament and dinner, be listed in the tournament program and be acknowledged in our chapter *Bulletin*. If you are interested or have questions, contact Jennifer Roth, (916) 551-2961 or jennifer.roth@calcpa.org.

\$3,000—Course Sponsor (limit 1)

- Golf for eight players (includes lunch & dinner)
- Acknowledgement in chapter *Bulletin*.
- Name recognition on all tournament materials.

\$1,700—Eagle Sponsor (limit 8)

- Golf for four players (includes lunch & dinner)
- Name recognition on all tournament materials.

\$1,500—Beverage Cart Sponsor (limit 2)

- Golf for four players (includes lunch & dinner)
- Name recognition on all tournament materials.

\$850—Par Sponsor

- Golf for two players (includes lunch & dinner)
- Name recognition on all tournament materials.

\$450—Hole Sponsor

- Golf for one player (includes lunch & dinner)
- Name recognition on all tournament materials.

\$250—Putting Contest Sponsor

- Name recognition

\$250—Picture Sponsor

- Name recognition

\$250—Beverage Sponsor

- Name recognition

\$250—Raffle Sponsor

- Name recognition

\$50—Golf Cart

To have at your own hole

\$50—Dinner only

Contributions or gifts to CalCPA are not tax deductible as charitable contributions for federal income tax purposes. However, they may be deductible under other provisions of the Internal Revenue Code. Please consult your tax advisor.

Sacramento Golf Tournament Sponsorship

Monday, Aug. 20

Make Checks Payable to: CalCPA and mail to: Jennifer Roth; Program Associate; CalCPA; 1201 K St., Suite 1000; Sacramento, CA 95814
Phone: (916) 551-2961 Fax: (916) 441-5354 jennifer.roth@calcpa.org

Name: _____ Phone: _____ Email: _____

Firm/Company: _____ Fax: _____

Address: _____ City, State, ZIP: _____

MC Visa AMEX Card No. _____ Exp. Date: _____ CSV: _____

Cardholder Name: _____

Check (Payable to CalCPA)

Players Information:

Player 1: _____ Firm: _____ Email: _____

Player 2: _____ Firm: _____ Email: _____

Player 3: _____ Firm: _____ Email: _____

Player 4: _____ Firm: _____ Email: _____

Player 5: _____ Firm: _____ Email: _____

Player 6: _____ Firm: _____ Email: _____

Player 7: _____ Firm: _____ Email: _____

Player 8: _____ Firm: _____ Email: _____

All net proceeds benefit the chapter's scholarship fund.