

FORTY-FIRST ANNUAL

WINGED FOOT GOLF INVITATIONAL

MONDAY, SEPT. 18, 2023



G-MAC "WEST COURSE" PACKAGE **\$9,000**

- Foursome at Golf Invitational to play on the renowned West Course
- Tee sign with logo
- Signage recognition at the event
- Designation as Underwriting Sponsor on all event signage and on CMRF Inc. website
- Foursome to start at a premium starting hole
- Designation as a sponsor of Dinner, Reception, and Lunch
- Opportunity to include branded item in gift bag

LOWRY "EAST COURSE" PACKAGE **\$7,500**

- Foursome at Golf Invitational to play on the East Course
- Tee sign with logo
- Signage recognition at the event
- Designation as a Sponsor on all event signage and on CMRF Inc. website
- Opportunity to include branded item in gift bag

McILROY UNDERWRITER PACKAGE **\$5,000**

(One sponsorship available for each category. Please indicate your preference by emailing events@carlacapone.com)

- One individual player on the East Course
- Tee Sign with Logo
- Exclusive signage and logo recognition
- Designated as sole sponsor of one of the following: (select one) Brunch Cocktail reception Dinner Caddies Gifts Awards

POWER PACKAGE **\$2,000**

- One individual player on East Course

HOLE SPONSOR (One tee sign with logo) **\$1,000**

CONTRIBUTION

I cannot attend but would like to support CMRF Inc.
Enclosed is my tax-deductible contribution in the amount of
\$ _____

The East Course and the West Course can each accommodate 25 foursomes. Course preference will be accommodated on a first come first serve basis.

NAME _____

TITLE _____

COMPANY _____

ADDRESS _____

CITY / STATE / ZIP _____

TELEPHONE _____

FAX _____

EMAIL _____

PAYMENT

If paying by credit card, please complete the following information or call the event office at 212.213.1166.

Visa / MasterCard / Discover / Amex (circle one):

NAME AS IT APPEARS ON CARD _____

CARD NUMBER _____

EXP. DATE _____

SECURITY NO. _____

SIGNATURE _____

BILLING ADDRESS (IF DIFFERENT THAN ABOVE) _____

CITY / STATE / ZIP _____

The Children's Medical Research Foundation (dba CMRF Inc.), is a tax-exempt organization, incorporated under the laws of Delaware. It has been determined by the IRS to be a public charity under Section 501(c)(3) of the Internal Revenue Code. EIN # 13-2984859. Contributions to it, less projected benefit value of goods and services of \$1,100 per person, are tax deductible as provided by law. Upon receipt of your gift, we will issue the appropriate charitable gift receipt for your use.

Please send an invoice for \$ _____.

Enclosed is my payment of \$ _____.

Please make checks payable to: **The Children's Medical Research Foundation** and Denote checks "**Winged Foot Invitational**" in the lower left corner.

Complete and return this form to: 41st Winged Foot Invitational, Event Office, The Children's Medical Research Foundation, Inc., at 345 Park Avenue, 17th Floor, New York, NY 10154

For additional information, contact the Event Office at **212.213.1166** or **events@carlacapone.com**

Children's Medical Research Foundation, INC., Est. 1979