

Sponsorship **Opportunities** benefiting National Kidney Foundation™ Monday June 29, 2020 **Squire Creek Country Club** 1:00 pm Shotgun Start Register online at www.kidneyla.org/liberty-mutualinvitationals Registration includes: • Putting green & driving range • 18 holes with cart • Buffet lunch • Player Gift Package • Awards Ceremony & Auction • Chance to compete at the 2021 Liberty Mutual Finals at Pinehurst March 24-28, 2021

Compete to play in the Liberty Mutual National Finals at Pinehurst!

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Local Corporate Gold Sponsor	\$7,500
 Three foursomes Reference in all press releases/promotional materials/website/to One beverage cart sponsorship Banner signage at tournament Opportunity to include item in participant gift bag Access to participant mailing list 	urnament program
Local Corporate Silver Sponsor	\$5,000
 Two foursomes Reference in all press releases/promotional materials/website/tou Two hole signs sponsorship Banner signage at tournament Opportunity to include item in participant gift bag Access to participant mailing list 	rnament program
☐ Local Corporate Bronze Sponsor	\$2,500
 One foursome Logo on all promotional materials/website/tournament program Hole sign sponsorship Opportunity to include item in participant gift bag Access to participant mailing list 	
Additional Sponsorship Opportunities	
Foursome	\$1,000
Golf course signage	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
Listing in tournament program	
Awards Reception Sponsor	\$600
 Signage in dining room 	
• Listing in tournament program	
 Mention in all tournament publicity 	
Lunch Sponsor	\$500
Signage in dining room	
Listing in tournament program	
 Mention in all tournament publicity 	
Beverage Cart Sponsorship	\$400
 Signage on cart and listed in tournament program 	
Hole Sponsor	\$250
• Exclusive signage at hole	

Total Contribution \$ _



Guarantee your reservation by returning this commitment form TODAY!

For questions call **504-861-4500** or email **torie@kidneyla.org**

benefiting **Contact Information** NAME/COMPANY National Kidney Foundation™ **ADDRESS** CITY, STATE, ZIP DAYTIME PHONE include AREA CODE une 29, 2020 FMAII Squire Creek **Payment Information** My total contribution is \$_____. My method of payment is Country Club Check made payable to **National Kidney Foundation of Louisiana** Please invoice me Charge Card # _____ Shotgun Star Exp Date: ____/__ CVV: ____ Zip Code associated with card NAME AS IT APPEARS ON CARD CARDHOLDER SIGNATURE Register online at www.kidneyla.org/ Mail completed commitment forms with payment to: liberty-mutual-invitationals The National Kidney Foundation of Louisiana Payments to be invoiced and OR Attn: Squire Creek LMI credit card payments can be 8200 Hampson Street, Ste. 425 faxed to (504) 861-1976 New Orleans, LA 70118 Compete to OR register online at www.kidneyla.org/liberty-mutual-invitationals play at the **Foursome Information** Name: Address:_ Liberty City,State,Zip:____ __Phone:__ *U.S.G.A. Handicap Index:____ Club Affiliation:__ Mutual Name: Address:__ City,State,Zip:____ *U.S.G.A. Handicap Index:____ Club Affiliation: National Name: Finals at Address: City,State,Zip:_____ Phone: *U.S.G.A. Handicap Index:____ Club Affiliation:___ Pinehurst! Name: Email: Address: City, State, Zip:___ Phone:

*U.S.G.A. Handicap Index: Club Affiliation: