



Port Arthur Sertoma Club

22nd Annual Golf Tournament

EIN# 74-6107168



Proceeds benefiting "Children & Adults with Speech and Hearing Disorders"

Friday, May 20, 2011

Tee Time: 1:00 p.m.
Check in at 11:00 a.m.
(Rain Day – Friday, May 27th)

Belle Oaks Golf Club
15075 Country Club Rd.
(Off Hwy 73 - Port Arthur)
409-796-1311

Four-Man Scramble

Entry fee includes green fees,
carts, food & beverages, prizes
and trophies.
\$5/mulligan; max of 2

*Awards Ceremony, including
dinner, will follow closing round.
Sponsors and guests are invited to
attend.*

*Silent Auction Items
Raffle Items
Door Prizes*



Sponsorships:

| | |
|----------------|-----------|
| Hole Sponsor | \$200 |
| Cigar Cart | \$500 (1) |
| Beverage Cart | \$500 (2) |
| Dinner Sponsor | \$500 (2) |

Any business is welcome to donate items
(150 each) such as koozies, t-shirts, caps,
golf towels, golf balls, pens, etc. for the
goodie bags each player will receive.

Raffle items, gift certificates and door
prizes are also needed.

Fees:

Platinum Sponsor - \$2,500; 2 teams;
company banner displayed at tournament;
sign placed on tee box; gift to each golfer;
company name and logo in all publicity.

Gold Sponsor - \$1,000; 2 teams and
company banner displayed at tournament
and sign placed on tee box.

Silver Sponsor - \$500; 1 team and sign
placed on tee box.

Team Sponsor - \$300; 1 team

Individual Player - \$75

Enclosed is a check for: _____ Total Amount Enclosed

| | |
|------------------------------|--------------------------|
| ___ Platinum Sponsor \$2,500 | ___ Hole Sponsor \$200 |
| ___ Gold Sponsor \$1,000 | ___ Cigar Cart \$500 |
| ___ Silver Sponsor \$500 | ___ Beverage Cart \$500 |
| ___ Team Sponsor \$300 | ___ Dinner Sponsor \$500 |
| ___ Individual Player \$75 | |

**RSVP & send payment by May 13th to: Port Arthur Sertoma Club
c/o Darlene Moody, 4700 Hwy 365, Suite A, #101, Port Arthur, TX 77642
Phone: 713-408-0205; Fax: 409-853-1213; dmoody101@earthlink.net**

Registration Form

Name: _____ Company: _____

Address: _____

Phone: _____ Email: _____

Player of Team Members:

Name: _____ Handicap: _____ Name: _____ Handicap: _____

Name: _____ Handicap: _____ Name: _____ Handicap: _____

LIMITED TO 36 TEAMS!