



AVE MARIA

Ave Maria Foundation Gala Week Sponsorships
September 13th Golf Tournament, 8 a.m. @ Quail Ridge Golf Course
September 19th Dinner Honoring Brother Joel McGraw, 6 p.m. @ CBHS

SOLD

TITLE SPONSOR (\$10,000)

Four complimentary golf teams on September 13
Three tables for eight at September 19th Dinner
Name on banner, on tournament materials, and in all publicity
Special Recognition of Title Sponsorship at Dinner

PLATINUM SPONSOR (\$6,000)

Three complimentary golf teams on September 13
Two tables for eight at September 19th Dinner
Name on banner, on tournament materials, and in all publicity

GOLD SPONSOR (\$3,500)

Two complimentary golf teams on September 13
One table for eight at September 19th Dinner
Name on banner, on tournament materials, and in all publicity

SILVER SPONSOR (\$2,500)

One complimentary golf team on September 13
One table for eight at September 19th Dinner
Name on banner, on tournament materials, and in all publicity

All Sponsorships include an advertisement in September 19th Dinner Program.

Play in Sept 13th Golf Tournament

ONE FOUR-PLAYER TEAM (\$800)

CART SPONSOR (\$750)
Signage on designated cart & name on banner

TEE OR GREEN SPONSOR (\$200)
Signage at designated tee or green and name on banner

PLAY ON A TEAM (\$200/player)

Attend September 19th Dinner

A TABLE OF EIGHT (\$800)

SEAT(S) @ \$100/person [# Seats = _____]

I'M UNABLE TO PLAY GOLF OR ATTEND THE DINNER, BUT WANT TO SUPPORT AVE MARIA'S GREEN HOUSE® PROJECT. MY GIFT IS ENCLOSED.

AVE MARIA GALA WEEK

GOLF TOURNAMENT AND DINNER REGISTRATION FORM

(Please check one and complete the form below)

Gala Week Registration—Dinner and Golf

Dinner Only Registration

Golf Only Registration

NAME(S) _____

COMPANY _____

ADDRESS _____

CITY _____ STATE _____ ZIP _____

PHONE _____ EMAIL _____

PAYMENT METHOD: CHECK CREDIT CARD

If Credit Card, check the appropriate card and complete the information below:

MASTERCARD VISA AMEX DISCOVER

CARD # _____ EXP. DATE _____
MONTH/YEAR

SECURITY CODE (ON BACK OF CARD) _____

NAME AS IT APPEARS ON THE CREDIT CARD _____

SIGNATURE _____



AVE MARIA

Return this form with your payment of check or credit card.
Make checks payable to the AVE MARIA FOUNDATION and mail to:
2805 Charles Bryan Road, Memphis, TN 38134 or fax to 901.405.3783.
For information, call Lisa Bell at 901.405.3791 or email lbell@avemariahome.org.