

2013



Northwestern
Health Sciences University

at



Prior Lake, MN

Dr. John B. Wolfe Alumni & Friends Golf Tournament

June 13, 2013 at The Wilds Golf Club

If you would like to register to become a sponsor at the golf tournament, please fill out the form below and FAX to (952) 886-7597 or mail it to: NWHSU, 2501 W. 84th St., Bloomington, MN 55431.

Please be sure to provide us with your contact information. As the tournament gets closer, we will give you a call to confirm your sponsorship, answer any questions and provide you with the details for the day. If you have any questions, please call (800/952) 888-4777, ext. 166 or 412.

Company Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ E-mail: _____

Sponsor Name (as it should appear on all signage):

Sponsorship Opportunities:

- ___ Lunch Sponsor - \$2,000 \$ _____
Includes recognition on the day of the event marketing materials and credit towards 2 players.
- ___ Refreshment Sponsor - \$1,000 \$ _____
Company name prominently displayed during the tournament on refreshment carts or coolers
- ___ Golf Cart Sponsor - \$1,500 \$ (not available)
Company name prominently displayed on golf carts during tournament play
- ___ Tee Sponsor - \$300 \$ _____
Join us on the course and sit at a hole! Your company name displayed (includes table & 2 chairs, 1 complimentary dinner ticket)
- ___ Green Sponsor - \$200 \$ _____
Company name prominently displayed at the tee (limited opportunities available)
- ___ Extra dinner tickets -\$30 each \$ _____

Total Enclosed \$ _____

I would like to support the tournament by providing the following door prize:

Prize sponsors will be recognized during the tournament and at the raffle during dinner.

Payment Method: ___ Check enclosed (payable to NWHSU)
___ Visa, MasterCard, or Discover: Card #: _____
Exp. Date: _____ CVV: (3-digit code - back of card) _____

Name as it appears on card: _____

For more information and to register to play in the tournament, please visit our website at:

<http://www.nwhealth.edu/alumni-career-services/alumni-golf>. Please fax the registration form to (952) 886-7597.

Thank you for your support!