

**MCHF 21st Annual
Benefit Golf Tournament
Saturday, August 25, 2018**

Sponsor Packages
Goodie Bags for each player
Program Recognition & MCH Website Advertisement

Golf for One \$50

Coffee, Juice and Donuts
Green Fees, 18 holes
Entry into all individual hole competitions
Lunch
Awards Ceremony

Green/Tee Sign \$100

Green/Tee Advertisement
Recognition in Golf Program

Lunch \$150 taken

Tent Cards on all Dining Room Tables
Recognition in Golf Program

Silver Package \$200

Golf for Two (includes items under Golf for One package)
Green/Tee Advertisement
MCH Website Advertisement
Program Recognition

Gold Package \$300

Golf for three (includes items under Golf for One package)
Green/Tee Advertisement (hole 1)
MCH Website Advertisement
Recognition in Golf Program (logo)
Advertisement on next year's brochure

Hole In One Sponsor \$200

(Sponsor early so company can print the sign with you name)

Sponsorships, donations, and prizes, etc are appreciated.
If you can't join us a donation toward the ER Project would be appreciated.
All sponsorships will receive a letter of participation with
tax information . ~ Thank You.

Morris County Hospital Foundation



Saturday, August 25, 2018

Council Grove Country Club
830 Hays Street
Three Person Scramble
Start: 8:00 am

18 Holes • Lunch • Awards Ceremony

Prizes Awarded for:

Hole-In-One - WIN \$10,000
(Golfer \$5,000 &
\$5,000 for the Foundation)

Fairway Prizes

Golf Ball Drop
(You do not have to be present to win)

**Cash Prizes For All Flights
Men & Mixed**

For questions please contact Caroline VonFeldt, Foundation Executive Director
at 620-767-6811, ext. 148 or cvonfeldt@mrcohosp.com

Morris County Hospital Foundation

**18 Hole Flight Tournament
Three-Person Scramble
Men ~ Mixed
Saturday, August 25, 2018
Council Grove Country Club**



Name of Organization/Person _____

Registration & Coffee & Donuts 7:15 am - 7:55 am
Shot-Gun Start 8:00 am
Lunch 11:00 am - 1:00 pm
Awards Ceremony 2:30 pm
\$50 per player # of players _____ x \$50 = \$ _____
\$15 for Golf Carts (if needed) _____ x \$15 = \$ _____

Sponsor Package: (see backside for details)

Green/Tee Sign Package \$100 \$ _____
 Lunch Sponsor \$150 \$ _____
 Silver Package \$200 \$ _____
 Gold Package \$300 \$ _____
 Hole-In One Sponsor \$200 \$ _____

Enclosed is my check for \$ _____

Or charge my Visa / Master Card

Card# _____ Exp. Date _____
(make checks payable to MCHF)

Return to: MCHF
600 N Washington
Council Grove, KS 66846
Or Fax to 620-767-5611

Registration Form

Must Be Received By Wednesday August 22nd

Name of Organization _____
Entering as (circle one) Men Mixed

1. Golfer Name _____
Address _____
City _____ State _____ Zip _____
Phone (w) _____ (h) _____ Gender F M

2. Golfer Name _____
Address _____
City _____ State _____ Zip _____
Phone (w) _____ (h) _____ Gender F M

3. Golfer Name _____
Address _____
City _____ State _____ Zip _____
Phone (w) _____ (h) _____ Gender F M

Registration form on web site www.mrcohosp.com.

Proceeds to be applied toward the Emergency Room Expansion/Renovation
2017 Gold Sponsors- Black Diamond Custom Feeders,
Blue Valley Tel-Communication, INC, Jernigan Veterinary Clinics, PA
KBS Constructors, Inc. , Mathis Physical Therapy & Hand Center;
Solutions 4 Fundraising; Tyner Insurance Group