

GOLF CLASSIC



PLEASE JOIN US

Date: October 20, 2022

Location: Cowboys Golf Club 1600 Fairway Dr., Grapevine, TX 76051

Shotgun Start: 8:00 am

Join us for Recovery Resource Council's Annual Golf Tournament as we **celebrate the resiliency** of our country and the veterans that defend and protect our American way of Life.

Cowboys Golf Club is etched into the rolling hills of Grapevine, Texas, and is distinguished as the first and only NFL-themed golf club in the world. Your sponsorship includes range balls, breakfast, lunch and all drinks and snacks on the course all while helping support Recovery Resource Council's mission. Your team or individual player sponsorship will fund crucial psychotherapy services for veterans and their families.





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Presenting Sponsor – \$15,000

- Two (2) Tournament foursomes
- Premier recognition in all tournament print, digital and social media
- One (1) table for 10 at the 35th Annual Stars in Recovery Luncheon
- Company Logo displayed on all golf carts
- Private Caddy throughout event to assist and tend to the players
- Framed Pin Flag (1 per sponsorship)
- VIP Sponsor gift for each team member

Council Friend – \$5,000

- One (1) Tournament foursome
- Recognition in all tournament print, digital and social media
- Company Logo displayed on all golf carts
- VIP Sponsor gift for each team member

Donation

I am unable to attend but would like to give a gift in the amount of \$_____.

Council Partner – \$10,000

- Two (2) Tournament foursomes
- Prominent recognition in all tournament print, digital and social media
- Company Logo displayed on all golf carts
- Framed Pin Flag (1 per sponsorship)
- VIP Sponsor gift for each team member

Golf Sponsor – \$2,500

- One (1) Tournament foursome
- Recognition in all tournament print, digital and social media
- Sponsor gift for each golfer

Individual Player – \$750

- Sponsor gift

Tee Box Sponsor – \$250

- Recognition at food and beverage stations

I would like to donate a raffle item

Sponsor Name: _____

Email: _____

PAYMENT INFORMATION

Please select an option below:

- I would like to pay by credit card – my information is below.
- I have enclosed a check made payable to Recovery Resource Council.
- Please send an invoice to the address below.

Contact Name: _____

Sponsor Name: _____

Name as it appears on card: _____

Billing Address: _____

Card Number: _____ Exp. Date: _____ CVV: _____

Signature: _____

Please mail payment to: Recovery Resource Council: 2700 Airport Fwy, Fort Worth, TX 76111



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TOURNAMENT TEAM/PLAYER FORM

Sponsor name (as it should appear in print): _____

*If you are not planning to have a complete foursome,
please let us know if we can fill those spots for you.
Shirt size deadline is August 1st.

Player Name 1:

Email: _____

Cell: _____

Shirt Size: small medium large xlarge
 xxlarge xxxlarge

Player Name 2:

Email: _____

Cell: _____

Shirt Size: small medium large xlarge
 xxlarge xxxlarge

Player Name 3:

Email: _____

Cell: _____

Shirt Size: small medium large xlarge
 xxlarge xxxlarge

Player Name 4:

Email: _____

Cell: _____

Shirt Size: small medium large xlarge
 xxlarge xxxlarge

Additional Comments:

