

# The Darryl Strawberry Foundation for Children and Families Affected by Autism

## 2<sup>nd</sup> Annual Golf Outing Bethpage State Park

### Red Golf Course

Farmingdale, New York

Monday, August 25, 2008

**Registration 12:00 p.m.**

**Tee-Off 1:30 p.m.**

### Sponsorship Opportunities!

#### Presenting Sponsor - \$50,000

Your name will be listed as a lead sponsor of the event on all printed material, Three foursomes with your choice of celebrity in each group, Sponsorship of the evening dinner, Premier seating, Opportunity for corporate item in gift bag, Special baseball bat autographed by all celebrity players

#### Tournament Gold Sponsor - \$25,000

Your name will be listed as a lead sponsor of the event on all printed material, Two foursomes with your choice of celebrity in each group, Sponsorship of the evening dinner, Premier seating, Opportunity for corporate item in gift bag, Special baseball bat autographed by all celebrity players

#### Silver Sponsor - \$15,000

Your name will be listed as a sponsor of the event on all printed material, One foursome with a premium celebrity, Sponsorship of golf carts, Premium seating at dinner, Opportunity for corporate item in gift bag, Special baseball bat autographed by all celebrity players

#### Bronze Sponsor - \$10,000

Your name will be listed as a sponsor of the event on all printed material, One foursome with a celebrity Premium seating at dinner

**Golf Foursome - \$3,000**

**Dinner Only - \$400**

### Additional Sponsorship Opportunities!

<b>Lunch Sponsor</b>	<b>\$7,500</b>	<b>Gift Bag Sponsor</b>	<b>\$5,000</b>
<b>Putting Green</b>	<b>\$4,000</b>	<b>Longest Drive</b>	<b>\$3,000</b>
<b>Closest to Pin</b>	<b>\$2,000</b>	<b>Pin Flag</b>	<b>\$1,500</b>
<b>Tee Sign</b>	<b>\$1,000</b>		

#### Golfer Information

Name: \_\_\_\_\_

Organization: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

E-mail: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

# of Foursomes: \_\_\_\_\_ Sponsorship: \_\_\_\_\_

# for Dinner: \_\_\_\_\_ Total Amount: \_\_\_\_\_

**Method of Payment:** Check: \_\_\_\_\_  
(Payable to The Darryl Strawberry Foundation)

**Credit Card:** MC Visa Discover AMEX

**Print Name, Company, Billing Address and Signature as it appears on the card**

Credit Card #: \_\_\_\_\_ Exp. Date: \_\_\_\_\_

Signature: \_\_\_\_\_

Golfer #1

Name: \_\_\_\_\_

Phone: \_\_\_\_\_ E-mail: \_\_\_\_\_

Handicap: \_\_\_\_\_

Golfer #2

Name: \_\_\_\_\_

Phone: \_\_\_\_\_ E-mail: \_\_\_\_\_

Handicap: \_\_\_\_\_

Golfer #3

Name: \_\_\_\_\_

Phone: \_\_\_\_\_ E-mail: \_\_\_\_\_

Handicap: \_\_\_\_\_

Golfer #4

Name: \_\_\_\_\_

Phone: \_\_\_\_\_ E-mail: \_\_\_\_\_

Handicap: \_\_\_\_\_

*For information about this event or to register, please contact the office of Development at 516-870-1583 or return this form to the address below:  
The Darryl Strawberry Foundation c/o FREE P.O. Box 66 • Old Bethpage, NY 11804 or Fax 516-870-1620*