



Friday, July 26, 2024

Green Hills Golf Club

3800 Old Fairfield Road, Mt. Vernon, IL 62864

8:00AM: REGISTRATION & CHECK-IN

10:00AM: SHOTGUN START

Lunch will be served at turns 9 & 18

** hot dogs & brats will also be served out at the far reaches of the course*

3:00PM: Post-Tournament Reception

** door prizes (must be present to win)*

SPONSORSHIPS:

Sponsorships include a foursome in the tournament and recognition in all tournament materials. Only one available unless noted otherwise.

- o Post-Tournament Reception Sponsor: **SOLD**
- o Awards Sponsor: **SOLD**
- o Hat Sponsor: \$2,000
- o Lunch Sponsor (2): \$2,000 (**1 SOLD**)
- o Team Photo Sponsor: \$1,500
- o Breakfast Bar Sponsor: \$1,500
- o Registration Sponsor: **SOLD**
- o Scramble Back 9 Griller Sponsor: **SOLD**
- o Cart Sponsor: **SOLD**
- o Course Beverage Station Sponsor: **SOLD**

ADDITIONAL SPONSORSHIPS:

Additional sponsorships DO NOT include golfer registration. All additional sponsors will receive their company logo and recognition in all tournament materials. Only one available unless noted otherwise.

- o Hole-In-One Contest Sponsor: \$1,000
- o Longest Drive Contest Sponsor: **SOLD**
- o Longest Putt Contest Sponsor: **SOLD**
- o Closest-To-The-Pin Contest Sponsor (2): \$300
- o Driving Range Sponsor: **SOLD**
- o Golf Hole Sponsor (18): \$300
- o Putting Green Sponsor: **SOLD**

INDIVIDUAL REGISTRATION:

Registration includes golf, cart, food, and beverages.

- o **Foursome Registration:** \$500 # _____
- o **Individual Golfer Registration:** \$125 # _____
- o **Non-Golfer Registration:** \$50 # _____
(incl. food & beverage)

GOLFER INFORMATION:

4-Person Scramble Tournament.

Player #1 _____

Player #2 _____

Player #3 _____

Player #4 _____

Contact Name _____

Company Name _____

Address _____

City _____ State _____ ZIP _____

Phone _____

Email _____

PAYMENT INFORMATION:

Total amount paid: _____

- o Send an invoice for payment to the address above.
- o My check is enclosed. Make checks payable to: IOGA
- o Please charge my credit card.
 - o MC o VISA o AmEx o Disc

Name on Card _____

Card Number _____

Exp Date _____ CVC# _____

Signature _____

REGISTER/SPONSOR

online at www.ioga.com
email this form to acook@ioga.com.

Call Jim Elder (713-305-1999) or
Ann Cook (618-242-2857) with any questions.