



# Hole Sponsorship Form HBA 2018 Annual Golf Outing



# Yep we cover Michigan

Mark Voss covers Home, Business and more



**FARM BUREAU INSURANCE®**



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## Tuesday, July 10, 2018 at Hawk Hollow Golf Course - 9:00am Shotgun Start

Company Name: \_\_\_\_\_ Contact: \_\_\_\_\_  
Address: \_\_\_\_\_ CSZ: \_\_\_\_\_  
Phone: \_\_\_\_\_ Fax: \_\_\_\_\_ Email: \_\_\_\_\_

\_\_\_\_ **Yes, I want to be a Beverage Cart Sponsor - ONLY 2 available - \$300 each**

- Includes a sign with your company name posted on the Beverage cart.
- One employee from your company is allowed to ride in one (1) Beverage Cart with Hawk Hollow staff driving the cart. This gives you a chance to see all the golfers.

\_\_\_\_ **Yes, I want to be a Hole in One Sponsor —ONLY 2 available \$300 each (Hole 7 or Hole 17)**

- Includes a sign with your company name posted at the hole along with a table & 2 chairs
- Two lunches delivered to your hole.
- Must be present at the hole to witness \$10,000.00 cash prize.
- Name printed on the Program, recognition in the Tool Box & signage on tables at the dinner.

\_\_\_\_ **Yes, I want to be a Member Hole Sponsor - \$150 each (add \$25 if NOT attending Golf Outing)**

- If you are NOT attending the Golf Outing you will be charged an additional \$25.
- Includes a sign with your company name at the hole.
- Two lunches delivered to your hole. A table & 2 chairs will be provided upon request.
- You MUST have someone represent your company at the hole you sponsor to get the \$150 rate.
- Name printed on the program, recognition in the Tool Box & signage on tables at the dinner.

\_\_\_\_ **Yes, I want to make a monetary donation for Door Prizes in the amount of \_\_\_\_\_.**

\_\_\_\_ **Yes, I want to provide a Raffle Prize for the outing. My Raffle Prize will be \_\_\_\_\_.**

Signage is provided at the dinner and company is announced for all monetary and prize donations. Email Lacey your company logo in the following formats: psd or ai (Photoshop, Illustrator) High resolution .jpg (300dpi or better).

**Non-refundable Payment Must Accompany Registration Form**

Company Name: \_\_\_\_\_ Contact name: \_\_\_\_\_ Phone: \_\_\_\_\_

Check enclosed     Charge my credit card for \$ \_\_\_\_\_    Visa    MC    AMEX

Card Number: \_\_\_\_\_ 3 digit number on back: \_\_\_\_\_ Exp. Date: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Cardholders Name: \_\_\_\_\_ Signature: \_\_\_\_\_

Fax to: (517) 323-0390 or mail to: HBA 2937 Atrium Dr. Ste 201, Okemos, MI 48864 Questions?  
Call the HBA at 323-3254 or email [lthompson@hbalansing.com](mailto:lthompson@hbalansing.com)