



Registration Form

Tuesday, May 22, 2012

Hermitage Golf Course
3939 Old Hickory Blvd.
Old Hickory, TN 37138

Section 1: Registration / Sponsor Contact Information

Company: _____
 Contact Person: _____
 Address: _____
 City: _____ State: _____ Postal Code: _____
 Phone: _____ Email: _____

Section 2: Sponsorship Opportunities

- | | | |
|--|--|--|
| <input type="checkbox"/> Eagle Sponsor \$5,000 | <input type="checkbox"/> Driving Range Sponsor (1) \$1,500 | <input type="checkbox"/> Full page ad \$250 |
| <input type="checkbox"/> Lunch Sponsor (1) \$3,000 | <input type="checkbox"/> Golf Team \$800 | <input type="checkbox"/> ½ page ad \$125 |
| <input type="checkbox"/> Birdie Sponsor \$2,500 | <input type="checkbox"/> Friends of Jason Level I \$750 | <input type="checkbox"/> Business card ad \$75 |
| <input type="checkbox"/> Breakfast Sponsor (1) \$1,500 | <input type="checkbox"/> Friends of Jason Level II \$500 | |
| <input type="checkbox"/> Putting Contest Sponsor (1) \$1,500 | | |
| <input type="checkbox"/> In Memory of Loved One Lost to Suicide \$25 | | |
| Name of Loved One: _____ | | |

Section 3: Golfer Registration *(Note: Eagle Sponsors receive 2 teams.)*

Team Name: _____	Team Name: _____
Golfer 1: _____	Golfer 1: _____
Golfer 2: _____	Golfer 2: _____
Golfer 3: _____	Golfer 3: _____
Golfer 4: _____	Golfer 4: _____

Section 4: Payment Details

CREDIT CARD:
 Card Holder's Name: _____
 Amount to be charged to the following card: \$.
 Credit Card Type: Visa Discover American Express Master Card
 Card #:
 Exp. Date V-Code (3 to 4 digits on the back of the card)
 Authorization Signature: _____ Date: _____

- Check Enclosed**
 INVOICE: Please send an invoice to my given address.

Please send completed form to:

The Jason Foundation, Inc.
 Attn: PFCD Golf Classic
 18 Volunteer Drive
 Hendersonville, TN 37075
 Fax: (615)264-0188, or Email: golf@phillipfulmergolfclassic.com