

MVHS Foundation & Bank of America *presents the*



This annual event reflects the bright future of healthcare in our community. We cordially invite you to join us at the Yahnundasis Golf Club on Monday, August 19, 2024, for an exciting and unforgettable day of golf. The proceeds from this event will benefit the Mohawk Valley Health System Foundation.

To culminate our day of golf, we will celebrate with a cocktail reception of delectable and substantial hors d'oeuvres and an open bar for everyone's enjoyment.

Course Sponsorship - \$10,000

- Signage recognition on the course, during the program and on the entrance sign
- Field of eight players (two teams) in the Golf Outing (includes lunch for each player)
- Golfer gifts for each player (eight)
- First choice of a.m./p.m. tee times.

Putting Contest Sponsorship - \$6,000

- Signage recognition at the putting green
- One tee sign on course, recognition during the program and on the entrance sign
- Field of four players (one team) in the Golf Outing (includes lunch for each player)
- Golfer gift for each player (four)
- First choice of a.m./p.m. tee times.

Cocktail Hour Sponsorship - \$5,000

- Signage recognition during the cocktail hour
- Recognition during the program and on the entrance sign
- One tee sign on the course
- Field of four players (one team) in the Golf Outing (includes lunch for each player)
- Golfer gift for each player (four)
- First choice of a.m./p.m. tee times.

Lunch Sponsorship - \$4,000

- Signage recognition during lunch, recognition during the program, on the entrance sign and one tee sign on the course
- Field of four players (one team) in the Golf Outing (includes lunch for each player)
- Golfer gift for each player (four)

Hole Sponsorship - \$3,000

- One tee sign on course and recognition during the program
- Field of four players (one team) in the Golf Outing (includes lunch for each player)
- Golfer gift for each player (four).

Please contact us by July 26, 2024.

For information on playing the event, please contact Kari Procopio at **315-624-5453** or **kprocopi@mvhealthsystem.org**.

Please email the completed form to kprocopi@mvhealthsystem.org by faxing 315-624-5737 or mailing to:
Mohawk Valley Health System Foundation
1676 Sunset Ave, Utica, NY 13502

Tee times will be assigned on a first come, first served basis.

Company Name

Contact Person

Address

City, State, Zip

Phone Number

Email Address

Print your name or company name as you want it to appear on your tee sign.

Enclosed is my check payable to:

MVHS Foundation

Please charge to my:

MasterCard Visa Discover American Express

Card # _____

Expiration Date _____

CV Code (3 digits on back of credit card) _____

