

# SPONSORSHIP & REGISTRATION FORM

I/We are pleased to support the Rossville Golf Outing with the following Sponsorship(s).

Hole Sponsor \$100 TOTAL \_\_\_\_\_

Event Sponsor \$1000 TOTAL \_\_\_\_\_

I/We cannot attend but wish to support Rossville with a monetary donation TOTAL \_\_\_\_\_

I/We would like to donate the following item(s) to be used as a raffle prize(s).

1. \_\_\_\_\_ 2. \_\_\_\_\_

Contact Name: \_\_\_\_\_ Company Name (If Applicable) \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Telephone \_\_\_\_\_

Wording for sign \_\_\_\_\_

(If you would prefer to attach your business card, we will use the company information for the sign)

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I/We are pleased to support Rossville by attending the Golf Outing on Saturday August 24, 2019

Names – maximum 4 per registration (you will be considered a foursome)

Primary contact person/phone: \_\_\_\_\_ Day of event cell# \_\_\_\_\_

1. Name: \_\_\_\_\_ Phone: \_\_\_\_\_

2. Name: \_\_\_\_\_ Phone: \_\_\_\_\_

3. Name: \_\_\_\_\_ Phone: \_\_\_\_\_

4. Name: \_\_\_\_\_ Phone: \_\_\_\_\_

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TOTAL # OF SPONSORSHIPS \_\_\_\_\_

TOTAL AMOUNT \_\_\_\_\_

TOTAL # OF GOLFERS \_\_\_\_\_

TOTAL AMOUNT \_\_\_\_\_

**\*\*This is a charitable function no refunds will be given in the event the golf portion of the day is rained out. \*\***

**Please make checks payable to: RCSD**

Send completed form and check to:

**Cory Dunn or Chad Geheb  
Rossville High School  
PO Box 530  
Rossville, IN 46065**