



Friday, April 8, 2022
JW MARRIOTT WILDFIRE GOLF CLUB

SPONSORSHIP COMMITMENT FORM

Name/Company: _____

Contact Name and Phone (if company is sponsor): _____

Address: _____

City, State, Zip: _____

Phone: _____ Email address: _____

PLEASE INDICATE HOW YOU WISH TO BE RECOGNIZED IN PRINTED MATERIALS:

I wish to participate in the 2022 Banner Children's Open as selected below:

- | | | |
|---|--|---|
| <input type="checkbox"/> Presenting - \$60,000 SOLD! | <input type="checkbox"/> Big Food Station - \$10,000 | <input type="checkbox"/> Underwriting: Please designate \$ _____ |
| <input type="checkbox"/> VIP Experience - \$30,000 | <input type="checkbox"/> F Fore the Kids - \$7,500 | for _____ |
| <input type="checkbox"/> Ace - \$20,000 | <input type="checkbox"/> Birdie - \$5,000 | (insert name of item you wish to underwrite) |
| <input type="checkbox"/> Eagle - \$15,000 | <input type="checkbox"/> Platinum Teddy Bear - \$3,000 | <input type="checkbox"/> I cannot attend the event, but would like to |
| <input type="checkbox"/> Big Golf Game - \$10,000 | <input type="checkbox"/> Pin Flag - \$1,000 | make a tax-deductible donation in the |
| | | amount of \$ _____ |

Do not send credit card information through email.

Signature: _____ Date: _____

Method of Payment:

- Please send an invoice for my sponsorship.
- Check # _____ enclosed. Please make check payable to Banner Health Foundation.
- I will pay online or via phone by credit card (note: credit card transactions of \$10,000 and above are subject to a 2% processing fee). Pay securely online at give.bannerhealth.com/golf

Banner Health Foundation (Tax ID 94-2545356) is a tax-exempt 501(c)(3) nonprofit organization.

When complete, please submit via:

Email: Golf@BannerHealth.com Fax: 602-747-3378

Questions, call: 602-747-8752