



Join us for a fun afternoon on a gorgeous course, for a great cause!



THE HAY
 PEBBLE BEACH
 OCT. 6, 2024
 1:30-4:30 PM

Sponsorship Opportunities

\$250 per player, includes:

- Putting practice
- 2pm shotgun start
- Refreshments
- Hole contests & prizes



Register Online

Scan QR code, or click link above to register online!

Hole-in-One Sponsor - \$7,500 (limited to 3)

- Most prominent display of logo on all marketing materials.
- One foursome.
- Opportunity to provide a logo item to the players
- Opportunity to present to the players at awards ceremony.

Albatross Sponsor - \$5,000

- Prominent display of logo on all marketing materials.
- Two players.
- Opportunity to provide a logo item to the players.

Eagle Sponsor- \$2,500

- Logo displayed on all marketing materials.
- Two players.
- Opportunity to provide a logo item to the players.

Birdie Sponsor - \$1,000

- Logo displayed on all marketing materials.
- One player.

Hole Sponsor - \$500

- Logo displayed on web site.
- One hole sponsor sign.



Do you want to advance arthritis research and treatment? Contact us today to sponsor the tournament. Email: golf@arthritisresearchcoalition.org Phone: (831)887-0278 Web: www.arthritisresearchcoalition.org/golf



THE HAY
 PEBBLE BEACH
 OCT. 6, 2024
 1:30-4:30 PM

Join us for a fun afternoon on a gorgeous course, for a great cause!



Yes, we'd like to sponsor Chip In for a Cure at the following level:

- Hole-in-One Sponsorship- \$7,500
- Albatross Sponsorship - \$5,000
- Eagle Sponsorship - \$2,500
- Birdie Sponsorship - \$1,000
- Hole Sponsorship - \$500

Commit to your sponsorship by September 1st for full recognition!



[Register Online](#)

Return this form below by email or postal mail. OR Register online using the link or QR Code above!

Company Name: <input type="text"/>	Company Website: <input type="text"/>
Street: <input type="text"/>	City: <input type="text"/>
Zip Code: <input type="text"/>	State: <input type="text"/>
Contact Name: <input type="text"/>	Title: <input type="text"/>
Email Address: <input type="text"/>	Phone: <input type="text"/>

Payment Method

- Check enclosed (payable to 'Arthritis Research Coalition')
- Please invoice us at the address provided above
- Please charge the following credit card number in the amount of \$

Card #: EXP CVV

Signature: DATE

Please list player names, and Team Captain here: