REGISTRATION AND SPONSOR FORM





To register online, visit PIHHealth.org/Golf

MONDAY, OCTOBER 27, 2025

tournament website and email communications | One tee sign

Friendly Hills Country Club 8500 Villaverde Dr., Whittier, CA 90605

8:30 am check-in and breakfast | 9:45 am call to carts | 10 am shotgun start

FOURSOME TEAMS

Double Eagle Team	\$10,000	Birdie Team	_ \$5,000
Golf for four, breakfast, barbecue lunch and dinner PIH Health publications Two tee signs Tee favor		Golf for four, breakfast, barbecue lunch and dinner One tee sign Tee	favors
Eagle Team	\$7,000		
Golf for four, breakfast, barbecue lunch and dinner PIH Health publications One tee sign Tee favors			
	UNDERWRITING	OPPORTUNITIES*	
Title Sponsor	\$50,000	Auction	_ \$4,000
Two Double Eagle foursomes and one Eagle foursome Recognition throughout tournament Recognition as benefactor in PIH Health publications Listed as Title Sponsor on all event materials On-stage recognition		Name/company logo featured on bid paddles Recognition on tou website and email communications One tee sign	rnament
Four tee signs	on stage recognition p	Volunteer	_ \$4,000
Greens	\$25,000	Recognition on volunteer name badges Recognition on tourname and email communications One tee sign	ent website
Recognition throughout the course Recognition publications Recognition on tournament webs		Golf Ball Logo	\$3.500
Two tee signs	nte una cinan communications	Name/company logo on golf balls distributed to each golfer Reco	
Dinner	\$12,000	on tournament website and email communications	
Recognition at dinner Recognition as benefact		Beverage	_ \$3,000
Recognition on tournament website and email of	communications Two tee signs	Recognition on beverage carts Recognition on tournament webs	ite and
Reception	\$8,000	email communications One tee sign	
Recognition at cocktail reception Name/company logo on drink tickets		Opportunity Drawing	_ \$3,000
Recognition on tournament website and email of Lunch		Name/company logo on opportunity drawing poster and presente Opportunity Drawing winners Recognition on tournament webs email communications	
Recognition at lunch Tabling opportunity and/	or signage for marketing		
during lunch Recognition on tournament webs communications One tee sign	site and email	Friends of PIH Health	
	40.000	Recognition at the event Recognition on tournament website and communications	d email
Breakfast		Mulligan	\$2,000
Recognition at breakfast Tabling opportunity a during breakfast Recognition on tournament v communications One tee sign		Name/company logo on mulligans Recognition on tournament w email communications	
Awards	\$5,000	☐ Chipping Contest	\$1 500
Presenter of awards Recognition during award on tournament website and email communication		Name/company logo on chipping contest signage Recognition or tournament website and email communications	
Golf Carts	\$5,000	□ Putting Contest	\$1 500
Digital advertisement display on all golf carts	Recognition on tournament	Name/company logo on putting contest signage Recognition on	_
website and email communications One tee si	ign	tournament website and email communications	
On-Course Activities	\$5,000	Snack	_ \$750
Sign at holes with on-course activities Recogrand email communications One tee sign	nition on tournament website	Recognition at the event Recognition on tournament website and communications	
Wine	\$5,000	Tee Sign	\$300
Table tent with name/company logo on dinner t	tables Recognition on	Name/company logo on a tee sign displayed on the course	

CONTACT

Name	Company					
Address						
City		State	_ Zip			
Phone	_ Email					
Tee sign recognition detail						
or email company logo in a hi-res PDF, or EPS	, and JPG, or PNG (1 N	ИВ+) format to Must	afa.Naqvi@PIHHealth.org.			
Please list preferred foursome or we can assig	n you to a team.			M F		
1. (Captain)	Email		Phone	🗆 🗀]	
2	Email		Phone]	
3	Email		Phone]	
4	Email		Phone]	
Dinner Guest (\$100) \$						
I am unable to attend, but I would like to don	ate \$					
TOTAL AMOUNT ENCLOSED \$						
PAYMENT					-	
Charge my credit card (scan and email to Mus	tafa.Naqvi@PIHHealth	n.org) Make checks p	payable to PIH Health Foundat	tion.		
□ Mastercard □ Visa □ Discover □ Ame	rican Express	PIH Health For			.	
Card Number		7612 Greenlea Whittier, CA 9				
Expiration DateCVV Billing	Zip	To register onl	ine, visit PIHHealth.org/Golf			
Signature			please call 562.967.2745 a fa.Naqvi@PIHHealth.org.	SCAN ME		



*Underwriting Opportunities (with the exception of the Title Sponsor) do not include golf and are 100% tax deductible. Tax ID 95-3761274.

PIH Health Foundation respects your privacy. If you prefer not to receive any further communications from us, please email PIHHealth.Foundation@PIHHealth.org or call 562.967.2745. It may take up to 30 days to process your request.