

SPONSORSHIP AGREEMENT FORM

MY ORGANIZATION WISHES TO:

Event Sponsor:

- Title Sponsor \$20,000
 Diamond Sponsor \$10,000
 Elite Sponsor \$6,000
 Platinum Sponsor \$3,000
 Gold Sponsor \$1,500

- Happy Hour Sponsor \$4,000
 On-course Beverage Sponsor \$2,500
 Welcome Beverage Sponsor \$1,500
 Snack Bag Sponsor \$1,500
 Cigar Sponsor \$1,000
 Closest to Pin Sponsor \$1,000
 Longest Drive Sponsor \$1,000
 Hole Sponsor \$250
 Cart Sponsor \$250

SPONSORSHIP INFORMATION:

Organization: _____

Business Address: _____

City, State & Zip Code: _____

Contact Name: _____

Title: _____ Phone Number : (____) _____

E-Mail Address: _____

TOTAL AMOUNT DUE: \$ _____

DO YOU NEED A DONATION RECEIPT? Yes
 No

PAYMENT METHOD:

- Visa Mastercard American Express Check

- A 3.50% processing fee will be applied to all credit card transactions.

Check: Payable to STN Incorporated

Memo: STN ForeCause

Address: 4464 Willow Road, Suite 102,
Pleasanton, CA 94588

Cristo Rey Tax ID: 82-1257099

Name on Card: _____

Card Number: _____

Exp. Date: _____ / _____ CID: _____ Billing Zip Code _____

Signature: _____ Date: _____