



THE BOSTON HOUSE

24th Annual Golf Tournament, Monday, June 3, 2019

REGISTRATION FORM

Please complete and mail (or fax) this form with your payment or payment information to: The Boston House Golf Tournament, 229 Kent Street, Brookline, MA 02446. Checks should be made out to the "The Boston House." When registering via fax, please be sure to fax BOTH pages of this form to 617.734.5239. If you have any questions, please call Peggy Enright, Andrew Richards, Dawn Emerman or Mike Emerman at the House: 617.734.3333.

NAME _____ COMPANY _____

ADDRESS _____

DAYTIME PHONE _____ FAX _____

EMAIL _____

CREDIT CARD (circle one) AE MC VISA NAME ON CARD _____

CREDIT CARD # _____ EXP. DATE _____ CVC _____ AMT ENCLOSED \$ _____

Select one: ☐ Charge my registration to this card ☐ HOLD* my registration with this card

*Credit cards used for "holds" will only be charged if your check is not received by June 3, 2019.

All sponsorship levels and golfer positions will be filled in the order they are received with appropriate payment. SORRY, NO PHONE RESERVATIONS.

I would like to sponsor the following level(s) of the tournament (check all that apply):

GOLF TOURNAMENT OPPORTUNITIES

- ☐ ~~Co-Presenting Sponsor (\$12,500)~~ SOLD, thank you Boston Children's Hospital!
- ☐ ~~Co-Presenting Sponsor (\$12,500)~~ SOLD, thank you Dana-Farber!
- ☐ Welcome Sponsor (\$9,000)
- ☐ Dinner Sponsor (\$8,000)
- ☐ Driving Range Sponsor (\$6,000)
- ☐ Lunch Sponsor (\$3,500)
- ☐ Technology Sponsor (\$3,500)
- ☐ Eagle Golfer Foursome (\$2,500)

NON-GOLF OPPORTUNITIES

- ☐ Advertising Sponsor (\$400)
- ☐ Cocktail Reception Only (\$75/Person)
- ☐ Donation (\$_____)
- ☐ Auction, Opportunity Drawing, or Goodie Bag Donor

Description/value of item(s) to donate to the Auction or Opportunity Drawing (by May 8, 2019):

If applicable, please send (B&W) program ad in JPEG file format to golf@thebostonhouse.org NO LATER THAN May 8, 2019.

For Office Use Only: R: _____ E: _____

GOLF TOURNAMENT PARTICIPANTS' REGISTRATION FORM

Golfers and Sponsors with golfers' benefits, please complete the following section (copy as needed):

FOURSOME #1

Golfer # 1 (Captain)	Golfer # 2
Name: _____	Name: _____
Address: _____	Address: _____
_____	_____
Telephone: _____	Telephone: _____
Email: _____	Email: _____
Golfer # 3	Golfer # 4
Name: _____	Name: _____
Address: _____	Address: _____
_____	_____
Telephone: _____	Telephone: _____
Email: _____	Email: _____

FOURSOME #2

Golfer # 1 (Captain)	Golfer # 2
Name: _____	Name: _____
Address: _____	Address: _____
_____	_____
Telephone: _____	Telephone: _____
Email: _____	Email: _____
Golfer # 3	Golfer # 4
Name: _____	Name: _____
Address: _____	Address: _____
_____	_____
Telephone: _____	Telephone: _____
Email: _____	Email: _____

Please include any special instructions/requests on a separate piece of paper. Thank you.