

2011 THROUGH KYLE'S EYES CHAMPIONSHIP GOLF TOURNAMENT SPONSORSHIP AND REGISTRATION FORM

<input type="checkbox"/>	TITLE SPONSORSHIP	\$25,000	\$ _____
<input type="checkbox"/>	EAGLE SPONSORSHIP	\$15,000	\$ _____
<input type="checkbox"/>	BIRDIE SPONSORSHIP	\$10,000	\$ _____
<input type="checkbox"/>	PAR SPONSORSHIP	\$5,000	\$ _____
<input type="checkbox"/>	DINNER SPONSORSHIP	\$3,500	\$ _____
<input type="checkbox"/>	COCKTAIL HOUR SPONSORSHIP	\$3,000	\$ _____
<input type="checkbox"/>	CART SPONSORSHIP	\$2,500	\$ _____
<input type="checkbox"/>	LUNCH SPONSORSHIP	\$2,000	\$ _____
<input type="checkbox"/>	BREAKFAST SPONSORSHIP	\$1,500	\$ _____
<input type="checkbox"/>	PUTTING CONTEST SPONSORSHIP	\$1,000	\$ _____
<input type="checkbox"/>	WOMEN'S LONG DRIVE SPONSORSHIP	\$500	\$ _____
<input type="checkbox"/>	MEN'S LONG DRIVE SPONSORSHIP	\$500	\$ _____
<input type="checkbox"/>	FLAG SPONSORSHIP	\$250	\$ _____
<input type="checkbox"/>	TEE SPONSORSHIP	\$100	\$ _____
<input type="checkbox"/>	INDIVIDUAL GOLF REGISTRATION	\$300	\$ _____
<input type="checkbox"/>	FOURSOME GOLF REGISTRATION	\$1,100	\$ _____
<input type="checkbox"/>	ALL CONTEST ENTRY FEE	\$50	\$ _____
<input type="checkbox"/>	DINNER GUEST	\$75	\$ _____
	GRAND TOTAL		\$ _____

METHOD OF PAYMENT: VISA Master Card American Express Discover

Check (Make check payable to: Through Kyle's Eyes Foundation)

COMPANY/INDIVIDUAL NAME: _____
(Please print as you wish to appear on sponsor listing)

BILLING NAME: _____

BILLING ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

BUS./HOME PHONE: _____ FAX: _____

EMAIL ADDRESS: _____

CARD NUMBER: _____ EXP. DATE: ____/____/____ CVV #: _____

SIGNATURE: _____

PLEASE MAIL FORM WITH PAYMENT OR FAX FORM WITH CREDIT CARD INFORMATION TO:
 Through Kyle's Eyes Foundation
 40485 Murrieta Hot Springs Road #211
 Murrieta, CA 92563
 Telephone Number: (951) 698-3414
 Fax: (951) 696-1390
TO PURCHASE ONLINE, VISIT OUR WEBSITE AT:
www.kylelograsso.org

