



LITTLETON REGIONAL HOSPITAL CHARITABLE FOUNDATION  
*Dr. Moose Golf Tournament - Golf Tournament*  
Friday, September 17, 2010

**EVENT SPONSOR REPLY FORM**

**I/we want to sponsor this fund raising event at the following level:**

_____ Gold Sponsor	\$ 5,000 ~ <i>Complimentary foursome</i>
_____ Silver Sponsor	\$ 2,500 ~ <i>Complimentary threesome</i>
_____ Bronze Sponsor	\$ 1,000 ~ <i>Complimentary twosome</i>
_____ Hospitality Bag Sponsor	\$ 750
_____ Hole Sponsors	\$ 500
_____ Tee Sponsors	\$ 250
_____ Tournament Donors	\$ 100

Name to appear on sponsorship sign: \_\_\_\_\_

Please email your company logo to [gclark@littletonhospital.org](mailto:gclark@littletonhospital.org)

Our check for \$ \_\_\_\_\_ made payable to **Littleton Regional Hospital Charitable Foundation – Dr. Moose Golf Tournament** is enclosed.

\_\_\_\_\_ Visa • Mastercard \_\_\_\_\_ • Discover \_\_\_\_\_ • Credit Card #: \_\_\_\_\_ Exp. \_\_\_\_/\_\_\_\_

\_\_\_\_\_ Sorry, we cannot be a sponsor, but our gift of \$ \_\_\_\_\_ is enclosed.

Name: \_\_\_\_\_

Company: \_\_\_\_\_

Address: \_\_\_\_\_

Phone no: ( ) \_\_\_\_\_

Authorized signature: \_\_\_\_\_

**Questions? Please call Gail Clark at (603) 444-9304**

