





CSHE CENTRAL VALLEY 9th ANNUAL GOLF TOURNAMENT

WHERE: The Reserve at Spanos Park

6301 W. Eight Mile Road Stockton, CA 95214

(209) 477-4653 www.reserveatspanospark.com

WHEN: Friday, August 19, 2016

7:00 a.m. – Registration and Continental Breakfast

8:30 a.m. - Shotgun Start

Awards, door prizes & lunch at the conclusion of play

COST: \$150 per player \$600 Foursome until 8/5/2016

Sponsorship Opportunity sheet

INCLUDES: Continental Breakfast, lunch, green fee and one raffle ticket.

CONTESTS: Longest Drive, 50/50 Contest, and Closest to Pin contests

REGISTRATION: Complete registration form and for Visa, MasterCard or American Express

payment forward via mail, fax or email to: jjones@calhospital.org.

OR Register online here (all payments accepted) (www.cshe.org → Events

→ Golf Tournaments)

Checks payable to:

CSHE, 1215 K Street, Suite 800,

Sacramento, CA 95814-3946, ATTN: J. Jones

NOTES: Participants must observe the following rules: soft spike golf shoes only

are allowed on the golf course and driving range; collared shirts are encouraged, but not required; and adhere to rules of the course and golf

carts.

QUESTIONS: If you have any questions, contact Ray McAlister at

rlm3019@gmail.com or CSHE Office at jjones@calhospital.org or (916) 552-7639.



Central Valley Sponsorship Opportunities

Sponsorship Opportunity	\$\$	Sponsor	
Breakfast Sponsor	\$300		
Lunch Sponsor	\$500		
Tee Sponsor	\$150		
Table/Hole Sponsor Alcohol tables are limited, please contact golf course for details. Food tables: tacos, hot dogs	\$250		
Beverage Sponsor	\$500		
Longest Drive Sponsor	\$250		
Closest to the Pin Sponsor	\$250		
Golf Bag Sponsor, if CSHE purchases bags	\$250		
Door Prizes		All Welcome	

All sponsors will receive signage and recognition at the golf tournament.

Open to All:

All CSHE sanctioned events are open to all CSHE members including facility, affiliate, retired, student. The cost to attend the event shall be set for each class of membership. Pricing may vary between each class of membership.

Cancellation:

After registering, attendees may cancel at any time, but only those cancellations received 14 days prior to the event will receive a refund.

Waiting List:

When an event has reached the approved capacity, no more registrations can be accepted. However, a waiting list will be established with first come first served. Preference will be given to facility members first, and then affiliates.

CSHE Central Valley 9Th Annual Golf Tournament REGISTRATION FORM

Contact Information				
Contact:	Company:			
Cell Phone:	Email:			
SPONSORSHIP OPPORTUNITY				
Sponsorship: \$				
Please list your company name as it will be displayed on signage.				
Sponsor Company				
Email your logo to jjones@calhospital.o		tions: (916) 552-7639		
GOLF REGISTRATION - \$1	50 per player Foursome	: \$600 until 8/9/2016		
Golfer #1:	Company:			
Cell Phone:	Email:			
Golfer #2:	Company:			
Cell Phone:	Email:			
Golfer #3:	Company:			
Cell Phone:	Email:			
Golfer #4:	Company:			
Cell Phone:	Email:			
Please complete this registration form; send with payment by mail, no later than August 5, 2016. Send checks payable to CSHE. Mail to: CSHE, 1215 K Street, Suite 800, Sacramento, CA 95814-3946 For credit cards, please provide the following information and email to jjones@calhospital.org: Method of Payment American Express Visa MasterCard				
, .				
Credit Card Number				
Security Code Billing 2	Zip Code	_ Amount \$		
Email receipt required: Yes No Email Address				

American Express can be used for payment via Square Payments system OR

<u>Register online here</u> (<u>www.cshe.org</u> → Events → Golf Tournaments) (all payments accepted).

Cancellation Policy: Cancellations must be in writing and faxed to (916) 552-7619 or email to jjones@calhospital.org prior to August 5, 2016. A \$45 non-refundable processing fee will be charged. Cancellations and non-attending registrants after August 5 will be responsible for the full registration fee. Substitutions are encouraged.