



The CSHE Northeastern Annual Golf Tournament committee invites you to join us for the

CSHE 22nd ANNUAL GOLF TOURNAMENT

- WHERE:** Turkey Creek Golf Course
1525 Highway 193
Lincoln, CA 95648
(916) 434-9100 www.turkeycreekgc.com
- WHEN:** Friday, June 24, 2016
9:00 a.m. – Registration and Putting Contest
10:30 a.m. – Shotgun Start
- COST:** \$150 per player \$600 Foursome
Sponsorship Opportunity sheet
- INCLUDES:** Boxed lunch, BBQ Dinner, green fee and one door prize ticket.
- CONTESTS:** Long drive, putting, and closest to pin contests
- REGISTRATION:** Complete registration form and for Visa or MasterCard payment forward via mail, fax or email to: jjones@calhospital.org.
- American Express can be used for payment; please forward registration form with golfer's information to tfrost@calhospital.org, who will process American Express through Square Register 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: 1) soft spike golf shoes only are allowed on the golf course and driving range; 2) observe dress code: jogging apparel or 'cut-offs' of any kind are not allowed. Collared shirts are encouraged, but not required; and 3) adhere to rules of the course and golf carts.
- QUESTIONS:** If you have any questions, contact Samantha Crosson at Samantha.crosson@patcraft.com or (530) 307-1519 or the CSHE Office at jjones@calhospital.org or (916) 552-7639.



SPONSORSHIP OPPORTUNITIES

<u>Sponsorship Opportunity</u>	<u>\$\$</u>	<u>Sponsor</u>	
Golf Bag Sponsor (if CSHE purchases)	\$1,000		
Lunch Sponsor	\$500	Patcraft & ATI	
Tee Sponsor	\$250		
Table Sponsor <ul style="list-style-type: none"> • Alcohol tables limited • Alcohol must be purchased from Turkey Creek • Food tables: tacos, hot dogs 	\$500		
Golf Cart Beverage Sponsor		Kelly Architects	
Putting Green Sponsor	\$500		
Driving Range Sponsor	\$500		
Longest Drive Sponsor	\$250	West-Com	
Closest to the Pin Sponsor	\$250	West-Com	
Dinner Sponsor	\$1,000		
Door Prizes (must not exceed \$300.)		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 NORTHEASTERN 22nd ANNUAL GOLF TOURNAMENT
REGISTRATION FORM**

Contact Information

Contact: _____ Company: _____
Cell Phone: _____ Email: _____

SPONSORSHIP

Sponsorship: _____ \$ _____

Please list your company name as it will be displayed on signage.

Sponsor Company _____
Email your logo to jjones@calhospital.org Questions: (916) 552-7639

GOLF REGISTRATION - \$150 per player Foursome: \$600

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 or with a credit card.
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 Visa MasterCard

Credit Card Number _____ - _____ - _____ - _____ Expiration Date _____ / _____

3-Digit Security Code _____ Billing Zip Code _____ Amount \$ _____

Email receipt required: Yes No Email Address _____

American Express can be used for payment; please forward registration form with golfer's information to tfrost@calhospital.org, who will process American Express through Square Register OR [Register online here](http://www.cshe.org) (www.cshe.org → 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 May 2, 2016. A \$45 non-refundable processing fee will be charged. Cancellations and non-attending registrants after May 2 will be responsible for the full registration fee. Substitutions are encouraged.