



14th Annual Charity Golf Tournament
Eagles Landing Golf Club
Thursday, August 28, 2014 Sunrise Breakfast 6:30 -- Shotgun Start 8:00

Registration Form

Name _____

Organization _____

Address _____

City _____ State _____ Zip _____

Telephone (_____) _____ E-Mail: _____

I would be happy to serve as:

_____ PLATINUM sponsor to benefit Truman Medical Centers' Charitable Foundation and Working Families Friends. Enclosed is my contribution of \$2,000.00 which allows (8) eight golfers to participate which includes breakfast, luncheon, announcements and signage indicating Breakfast or Luncheon Host.

_____ GOLD sponsor to benefit Truman Medical Centers' Charitable Foundation and Working Families Friends. Enclosed is my contribution of \$1,000.00 which allows (4) four golfers to participate and includes breakfast, luncheon and advertisement.

_____ BRONZE - Hole sponsor to benefit Truman Medical Centers' Charitable Foundation and Working Families Friends. Enclose is my contribution of \$ 250. Your monetary contribution includes advertisement of your organization.

_____ SILVER - Gift or donation sponsor to benefit Truman Medical Centers' Charitable Foundation and Working Families Friends. Your contribution includes advertisement of your organization.
Please describe your donation _____

List designated team players names below.

Golf Team Captain: _____ Team Member #2: _____

Team Member #1: _____ Team Member #3: _____

For payments by credit card please call the office 816-836-8485

Our check for \$ _____ is enclosed and made payable to:
KC Building Trades Council Charity Account
400 S. Main Street Independence, MO 64050

Questions? Call (816)836-8485 Fax: (816)836-8486 info@buildkc.org