



2018 Spartan Scholarship Golf Tournament

To Benefit the Berthoud High School Scholarship Program
"Not your average Charity Scramble"

Monday, August 13, 2018

Presented by:



Colorado

SPONSORSHIP

\$1,000—Hole Sponsor
\$100—Putting Competition Sponsor

Schedule of Events

7:00 am – 9:00 am	Breakfast, Warm-up & Putting Competition
9:15 am	Welcome
9:30 am	Shotgun Start
2:30pm	Awards Luncheon

"Come Play where the Pros play"

Format

2 Person Scramble
Gross Division & Net Division
Entry Fee: \$250 per Player
Includes – Tournament Fee, Continental Breakfast, Favors, Putting Competition & Awards Luncheon

For Sponsorship opportunities or contributions, please contact Deanne Mulvihill at 970.532.4200 or deanne@berthoudcolorado.com.

SPONSORSHIP FORM

Name: _____
 Company: _____
 Address: _____
 City: _____ State: _____ Zip: _____
 Phone: _____
 Email: _____

Credit Card Information: \$1,000—Hole Sponsor \$100—Putting Competition Sponsor

_____	_____	_____
Card Number	CSC Code	Expiration Date

_____	_____
Name on Card	Billing Address

Sponsorship Checks Payable to:
Thompson Education Foundation
a 501(c)3 Foundation

Mail Completed Form to: Berthoud Area Chamber of Commerce
PO Box 1709
Berthoud, CO 80513

Committee Members:

Deanne Mulvihill, Mick Newberg, Wes Hartman, Jose Cabrera, Bret Ludwick, Isaiah Rozek, Amie Pilla, Kathy Burcham

REGISTRATION FORM

Team #1

Player #1: _____ Player #2: _____
Address: _____ Address: _____
City: _____ State: _____ Zip: _____ City: _____ State: _____ Zip: _____
Phone: _____ Phone: _____
Email: _____ Email: _____
Handicap: _____ or Best Score: _____ Handicap: _____ or Best Score: _____

Team #2

Player #1: _____ Player #2: _____
Address: _____ Address: _____
City: _____ State: _____ Zip: _____ City: _____ State: _____ Zip: _____
Phone: _____ Phone: _____
Email: _____ Email: _____
Handicap: _____ or Best Score: _____ Handicap: _____ or Best Score: _____

Please check here if you would like us to pair you with a partner _____

Credit Card Information:

Card Number CSC Code Expiration Date

Name on Card Billing Address

Card Number CSC Code Expiration Date

Name on Card Billing Address

Team Registration Checks Payable to:
Berthoud Area Chamber of Commerce

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