

# Stix Fore Chix Golf Fore a Cure



June 18, 2010

Fox Hollow Golf Club

Net proceeds will go to the Susan G. Komen 3-Day for the Cure to be invested in breast cancer research.

Because everyone deserves a lifetime.

## Level

**Platinum — \$3,000**

**Gold — \$2,000**

**Silver — \$1,000**

## Package

### **Prominent banner display**

Name and Logo on Advertisements,  
Flyers and Shirts

2 four person teams

Hole sponsorship

### **Name and Logo on Shirts**

1 four person team

Hole sponsorship

### **Name and Logo on Shirts**

2 golf spots on a team

Hole sponsorship



**For your opportunity, call:**

**Richard Walker: 612-382-7105**  
([rwalker@yorksolutions.net](mailto:rwalker@yorksolutions.net))

**Chris Hyde: 763-245-0745**  
([cscjchide@charter.net](mailto:cscjchide@charter.net))

**Tim Clark: 763-442-4746**  
([tcconcepts@comcast.net](mailto:tcconcepts@comcast.net))



**Platinum Level**  
**Gold Level**  
**Silver Level**

# Stix Fore Chix Golf Fore a Cure



Help us paint the course by wearing pink!



**June 18, 2010**  
**Fox Hollow Golf Club**

Net proceeds will go to the Susan G. Komen 3-Day for the Cure to be invested in breast cancer research and community programs.

**Longest Drive**  
**Putting Contest**  
**Pink Ball Challenge**  
**Balloon Challenge**  
**Live Music**  
**Silent Auction**  
**Raffles**  
**Prize for Best Dressed**  
**Competition**

**Remember, only REAL  
men wear pink!**

<b>Time</b>	<b>Event</b>
11:30 p.m.	Registration
1:00 p.m.	Shotgun Start
6:00 p.m.	Dinner and Dance

## Event Sign-up

Name (Individual or Team Captain) _____		Price
Email address _____		<input type="checkbox"/> Team registration (includes dinner/dance for 4 people) \$400.00
Phone _____		<input type="checkbox"/> Individual registration (includes dinner/dance for 1 person) \$100.00
Method of Payment		<input type="checkbox"/> Dinner and Dance Only \$25.00
<input type="checkbox"/> Cash <input type="checkbox"/> Visa		
<input type="checkbox"/> Check <input type="checkbox"/> MasterCard		
<input type="checkbox"/> American Express	Name of diner _____	
Credit Card Number _____ Exp. date _____	Name of diner _____	
Signature _____		Total: _____

### Questions? Contact:

Richard Walker: 612-382-7105  
(rwalker@yorkolutions.net)

Tim Clark: 763-442-4746  
tcconcepts@comcast.net

**Please email or mail completed registration form.**

### If mailing:

Richard and Lisa Walker  
15451 45th Street NE, St. Michael, MN 55376