

Inaugural "2 Man Scramble" Golf Tournament



**BENEFITING
SCHOLARSHIP PROGRAM**

**MONDAY
APRIL 1, 2024**

11:00 AM CHECK-IN

1:00 PM SHOTGUN START

DINNER TO FOLLOW
AT PAGA HALL
2131 N. COMMERCE ST.
FORT WORTH, TX 76137



**DIAMOND OAKS
COUNTRY CLUB**

5821 DIAMOND OAKS DR.N.
FORT WORTH, TX 76117

**PAN AMERICAN GOLF
ASSOCIATION OF FORT WORTH**



AJ@MACIASSPECIALTY.COM



ABE JACKSON (817) 368-9456

INCLUDES

Cash Prize Pay Out
Two Man Scramble Format
Prizes for closest to the pin,
longest drive, and many chances
to win raffle prizes

TEAM \$270
SPONSORSHIP LEVELS
\$200 \$350 \$600 \$1,000
\$1,500



Sponsorship Levels



CORPORATE SPONSOR

\$1,500

- Two Teams
- One sign with your company name and logo placed at a tee box
- Business featured at Golf Course
- Special Recognition at Dinner



EAGLE SPONSOR

\$1,000

- One team
- One sign with your company name and logo placed at a tee box
- Business featured at Golf Course
- Special Recognition at Dinner



BIRDIE SPONSOR

\$600

- One Team
- One sign with your company name and logo placed at a tee box
- Business featured at Dinner



PAR SPONSOR

\$350

- One Team
- One sign with your company name and logo placed at a tee box



BOGEY SPONSOR

\$200

- One sign with your company name and logo placed at a tee box

TEAM

\$270

Two Players

RAFFLE TICKETS

50/50 Raffle

General Raffle



REGISTRATION

**MONDAY, APRIL 1, 2024
DIAMOND OAKS COUNTRY CLUB
5821 DIAMOND OAKS DR. N.
FORT WORTH, TX 76117**

| | | |
|--------------------|-------|-------|
| COMPANY NAME | _____ | |
| CONTACT NAME | _____ | |
| ADDRESS | _____ | |
| CITY / STATE / ZIP | _____ | |
| PHONE NUMBER | EMAIL | _____ |

SPONSORSHIP/ REGISTRATION (CHECK ALL THAT APPLY):

- CORPORATE SPONSOR \$1,500
- EAGLE SPONSOR \$1,000
- BIRDIE SPONSOR \$600
- PAR SPONSOR \$350
- BOGEY SPONSOR \$200
- TEAM \$270

I AM UNABLE TO PARTICIPATE, BUT PLEASE ACCEPT THIS DONATION.

TOTAL FOR SPONSORSHIP \$ _____

DONATION FOR SPONSORSHIP \$ _____

TEAM INFORMATION

| PLAYER 1 | | PLAYER 2 | |
|----------|-------|----------|-------|
| NAME | _____ | NAME | _____ |
| EMAIL | _____ | EMAIL | _____ |





RAFFLE DONATION FORM

DONOR'S INFORMATION

DONOR

COMPANY

ADDRESS

CITY

STATE

ZIPCODE

PHONE

EMAIL

DESCRIPTION OF ITEM BEING DONATED

ITEM

GIFT BASKET

GIFT CERTIFICATE

OTHER

VALUE

\$

DELIVERY

PICK-UP

SUBMIT FORM



Thank You

