



ClearWater Academy

Discovering Strengths. Creating Hope.

a school for children with learning differences
a 501(c)(3) charitable organization

***ANNUAL GOLF TOURNAMENT
SPONSOR APPLICATION***



See Who We Are!

To Benefit

Youth & Adults with Developmental Disabilities



Check Out Our Website!

Thursday, April 18, 2019 – 9:00 AM

Registration and breakfast at 8:00AM
Braelinn Golf Club, 500 Clubview Drive, Peachtree City, GA 30269

COMPANY NAME:	PHONE:
CONTACT PERSON:	EMAIL:
ADDRESS, CITY, COUNTY, STATE, ZIP:	

Check one	SPONSOR CHOICE	AMOUNT
	PRESENTING SPONSOR: (2) foursomes, 10 mulligans, 8 raffle tickets, tournament would be CWA Golf Tournament presented by your company, (2) tee signs, website, social media, and annual report recognition	\$3,500.00
	BIRDIE SPONSOR: (1) foursome, 5 mulligans, 2 raffle tickets, featured on scoreboard banner, (1) tee sign, website, social media, and annual report recognition	\$1,000.00
	PAR SPONSOR: (2) players, (1) tee sign, website, social media and annual report recognition	\$500.00
	HOLE SPONSOR: tee sign company name and logo	\$250.00
Note: Email tcollins@ClearWater.Academy a copy of your company logo no later than March 30, 2019		

**PLEASE LIST PLAYERS ON THE BACK SIDE OF THIS FROM
AMOUNT ENCLOSED**

Sponsorship Fee \$ _____ (Minimum \$250.00)
Donation \$ _____ (Any Amount)

Make Checks Payable to: ClearWater Academy and Mail to:
Christine Harper @ P.O. Box 3513 Peachtree City, GA 30269
(678) 628-6034 tcollins@ClearWater.Academy

Total Enclosed

\$_____

Please list names of players, emails, and cell numbers. We will be sending you a copy of the photos taken that day for you to enjoy.

Team 1-Name of Team_____

Player 1Name: Email: Cell #	Player 2Name: Email: Cell #
Player 3Name: Email: Cell #	Player 4Name: Email: Cell #

Team 2-Name of Team_____

Player 1Name: Email: Cell #	Player 2Name: Email: Cell #
Player 3Name: Email: Cell #	Player 4Name: Email: Cell #

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