



Wellsprings Village Inc.

6th Annual Charity Golf Tournament

The Golf Club at Cinco Ranch
23030 Cinco Ranch Blvd.
Katy, Texas 77450
(832) 771-3464



TUESDAY, SEPTEMBER 17, 2013

The mission of Wellsprings Village, Inc. is "To provide a safe, growthful environment for homeless and abused women. We seek to empower them to become economically and emotionally self-sustaining members of society."



Register on line at www.wellspringsvillageinc.org

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FORM A TEAM TODAY !!

Gold Sponsor - \$5,000

Two (2) foursomes in tournament
(\$1,200 Value)

Premier Signage Opportunities

Contribute Promotional items to
golfer gift bags

Reserved Table at Lunch & Dinner
Gift Bags for all Players

Foursome Team- \$600

One (1) foursome in tournament
(\$600 Value)

Gift Bags for all Players

Lunch & Dinner

Tournament Dinner Sponsor - \$1,500

Help cover the overhead costs
for providing dinner

Signage Opportunities

Silver Sponsor - \$2,500

One (1) foursome in tournament
(\$600 Value)

Signage Opportunities

Contribute Promotional items to
golfer gift bags

Reserved Table at Lunch & Dinner
Gift Bags for all Players

Hole Sponsor - \$250

Signage and Giveaway Option
at one hole

Beverage Cart Sponsor - \$1,000

Company Sign on Beverage
Cart on the day of the
Tournament



Please Check the Appropriate Boxes:

- Gold Sponsor - \$5,000
- Silver Sponsor - \$2,500
- Foursome Entry - \$600
- Hole Sponsor - \$250
- Tournament Dinner Sponsor - \$1,500
- Beverage Cart Sponsor - \$1,000
- Single Entry - \$150 (actual value \$60)
- Mulligans - \$10 each or 3 for \$25
- I regret that I cannot participate, please accept my contribution

Entry Form



Tournament Schedule

Tuesday, September 17, 2013

11:00 am to 12:30 pm – Registration
and Lunch

12:45 pm – Shotgun Start

5:30 pm – Dinner, Awards and
Prizes

Make checks payable to: **Wellsprings Village, Inc.**

P.O. Box 311017, Houston, Texas 77231, Phone: 713 854-4756 fax 713-954-4931

MY CHECK IS ENCLOSED VISA/MASTERCARD AMERICAN EXPRESS

AMOUNT: \$ _____ CARD NUMBER: _____ Security Code: _____

EXP. DATE: _____ SIGNATURE: _____

NAME: _____ HANDICAP: _____

ADDRESS: _____ TEL: _____

BUSINESS NAME: _____ E-MAIL: _____

NAME: _____ HANDICAP: _____

ADDRESS: _____ TEL: _____

BUSINESS NAME: _____ E-MAIL: _____

NAME: _____ HANDICAP: _____

ADDRESS: _____ TEL: _____

BUSINESS NAME: _____ E-MAIL: _____

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ADDRESS: _____ TEL: _____

BUSINESS NAME: _____ E-MAIL: _____

Register on line at www.wellspringsvillageinc.org
For more information contact Mary Lou Kelly at 713-854-4756,
or Sergio Weitzman at 713-922-0567

Thank you for Participating!

