



2019 Registration Form



Name _____

Company _____

Address _____

City/State/ZIP _____

Phone _____

Email _____

Monday, June 17, 2019 at Monroe Golf Club

Sponsorship/Foursome Level (select one)

- Gold Sponsor \$7,500 (tax-deductible amount \$6,500)
- Silver Sponsor \$5,000 (tax-deductible amount \$4,000)
- Hole-in-One Sponsor \$1,500 (tax-deductible amount \$1,500)
- Foursome \$1,500 (tax-deductible amount \$500)
- Twosome \$750 (tax-deductible amount \$250)
- Raffle Sponsor \$1,000 (tax-deductible amount \$1,000)
- Tee Sponsor \$500 (tax-deductible amount \$500)
- Closest to the Pin Sponsor \$500 (tax-deductible amount \$500)
- Longest Drive Sponsor \$500 (tax-deductible amount \$500)

Total Amount \$ _____

Please Send Invoice

Check Enclosed

**Please make checks payable to:
Hillside Children's Foundation
PO Box 1901
Albany, NY 12201-1901**

Golfer Names and Information

Name of Team Coordinator _____

Address _____ City/State/ZIP _____

Phone _____ Email _____ Company _____

Name of Golfer 2 _____

Address _____ City/State/ZIP _____

Phone _____ Email _____ Company _____

Name of Golfer 3 _____

Address _____ City/State/ZIP _____

Phone _____ Email _____ Company _____

Name of Golfer 4 _____

Address _____ City/State/ZIP _____

Phone _____ Email _____ Company _____

**For questions, or if you or any of your golfers have dietary restrictions,
please contact Brandie Cain at (585) 256-7557 or bcain@hillside.com.**