



**Greek American Rehabilitation
and Care Centre**
a wholly-owned subsidiary of
Greek American Health Services Foundation



SPONSOR CONTRACT

Golf Outing - Monday, June 17, 2024
Ivanhoe Club - Ivanhoe, Illinois

_____ HOLE SPONSOR \$250

NAME or BUSINESS: _____

ADDRESS: _____

CITY: _____ **STATE:** _____ **ZIP:** _____

Phone: _____

Email: _____

How would you like the sign to read?
(Businesses include card)



SPECIAL SPONSORS AND DONORS NEEDED FOR:

VIP GOLF SPONSORSHIP:

Golf Sponsor _____ \$20,000
Includes: 8 Golfers, Prominent Signage at
the Event and Special Mention at Awards
Dinner, Logo on Event Website

Dinner Sponsor _____ \$ 8,000
Includes: 4 Golfers, Prominent Signage
and Special Mention at Awards Dinner,
Logo on Event Website

Lunch Sponsor _____ \$ 3,500
Includes: 2 Golfers, Prominent Signage
and Special Mention at Lunch, Logo on
Event Website

SPONSORSHIP AND DONATIONS:

Gift Sponsor	_____	\$ 3,000
Beverage Station (3)	_____	\$ 1,000(ea)
Cocktail Hour Sponsor	_____	\$ 1,250
Hole In One	_____	\$ 1,000
Eagle Donor	_____	\$ 500
Birdie Donor	_____	\$ 300
Par Donor	_____	\$ 100

DEADLINE - Tuesday, June 11, 2024

Please Make Check Payable to: **Greek American Health Services Foundation**

Questions? Call: Chris Atsaves: 847-942-8389 cell
312-525-4510 day
Dino Varnavas: 815-370-6510
dvarnavas@garcc.org
chris.atsaves@ubs.com

SEND TO: Pat Gerbanas
201 Strong St., Suite 9
Wheeling, IL. 60090

Pat Gerbanas: 224-434-0509
pgerbanas@garcc.org

Charge my Credit Card Account: _____ **Exp. Date:** _____

Signature: _____ **Sec. Code:** _____ **Zip Code:** _____

www.greekamericancare.org

19TH ANNUAL

The Greek American Health Services Foundation and The Greek American
Rehabilitation and Care Centre are Illinois Not For Profit Corporations
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GOLF OUTING