

**Cancer Services Charity Golf Outing**  
**Wednesday July 20, 2022**  
**Eagle Creek Golf Course, Norwalk**

Team Registration Form

Please print clearly and include payment with registration form. May email, mail, or drop off registration form to Cancer Services. For questions, please call 419-626-4548 or email CecilyBrownCS@gmail.com

**TEAM INFORMATION: \$600 per team, \$150 per person.**

Team Name: \_\_\_\_\_

Contact Person: \_\_\_\_\_ Contact Phone: \_\_\_\_\_

Contact Address: \_\_\_\_\_

Player 1: \_\_\_\_\_ Email: \_\_\_\_\_

Player 2: \_\_\_\_\_ Email: \_\_\_\_\_

Player 3: \_\_\_\_\_ Email: \_\_\_\_\_

Player 4: \_\_\_\_\_ Email: \_\_\_\_\_

**HOLE SIGN INFORMATION: \$125 per sign**

1). Sponsored by: \_\_\_\_\_ Tribute to: \_\_\_\_\_

2). Sponsored by: \_\_\_\_\_ Tribute to: \_\_\_\_\_

3). Sponsored by: \_\_\_\_\_ Tribute to: \_\_\_\_\_

4.) Sponsored by: \_\_\_\_\_ Tribute to: \_\_\_\_\_

**PAYMENT TOTAL:** TOTAL: \$ \_\_\_\_\_ **METHOD:** \_\_\_\_\_ Check enclosed \_\_\_\_\_ Cash \_\_\_\_\_ Online

*Please make checks payable to Cancer Services*

**Cancer Services**  
505 E. Perkins Ave.  
Sandusky OH 44870

Phone: 419.626.4548 Fax: 419.502.0222 Email: CecilyBrownCS@gmail.com

***Cancer Services is a non-profit 501(c)(3) agency and your gift is tax deductible to the extent allowed by law.***

*For more information on Cancer Services visit our website: [www.cancerresources.org](http://www.cancerresources.org)*

***PLEASE NOTE: There are no cancellation refunds after June 1<sup>st</sup>.***

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Sponsorship Registration Form

*Email your logo for recognition as soon as possible to [CecilyBrownCS@gmail.com](mailto:CecilyBrownCS@gmail.com)*

*Logos need to be received before June 28th. The sooner we receive logos the more social media and printed material advertising you will receive. Your recognition begins as soon as payment is received and will continue before, during and the week following the golf outing. Thank you for your support!*

\*\*\*\*\*

**Yes, I would like to support local cancer patients through sponsoring the Cancer Services Charity Golf Outing!**

Business Name: \_\_\_\_\_

Contact Person: \_\_\_\_\_

Address: \_\_\_\_\_

Email: \_\_\_\_\_

Phone: \_\_\_\_\_

**Sponsor Levels**

**Tournament Sponsor: \$3,500**

**Gold Sponsor: \$2,500**

**Silver Sponsor: \$1,500**

**Dinner Sponsor: \$1,500**

**Lunch Sponsor: \$1,000**

**Beverage Sponsors: \$500**

**Hole Sponsor/Tribute Sponsor: \$125**

1). Sponsored by: \_\_\_\_\_ Tribute to: \_\_\_\_\_

2). Sponsored by: \_\_\_\_\_ Tribute to: \_\_\_\_\_

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**PAYMENT TOTAL:** TOTAL: \$ \_\_\_\_\_ **METHOD:** \_\_\_\_\_ Check enclosed \_\_\_\_\_ Cash \_\_\_\_\_ Online

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