TPS THAYER
Certified Public Accountants

Friday, October 20th
Quail Valley
Missouri City, TX
77459

2023 9TH ANNUAL CHARITY GOLF TOURNAMENT

SPONSORSHIP

Benefiting Reining Strength Therapeutic Horsemanship

TITLE SPONSOR
☐ **$3,000**

- 8 playing spots (2 foursomes)
- Company logo on TPS Thayer website & all social media/promotional material
- Tent, table & 2 chairs with signage to promote your business
- 8 lunch tickets |Special award presented at lunch

GOLD SPONSOR
☐ **$2,500**

- Team of 4
- Signage at one hole
- 4 lunch tickets |Special award presented at lunch
- Website and social media recognition

SILVER SPONSOR
☐ **$1,500**

- Team of 4
- 4 lunch tickets |Special award presented at lunch
- Website and social media recognition

LUNCH SPONSOR
☐ **$1,200**

- Significant exposure at awards lunch
- Website and social media recognition

BREAKFAST SPONSOR
☐ **$800**

- Significant exposure during registration & breakfast
- Website and social media recognition

BEVERAGE CART SPONSOR
☐ **$500**

- Logo sign included on one beverage cart
- Beverage cart stocked with beer and soda
- Logo included on all email blasts, social media posts/web content
- Website and social media recognition

HOLE SPONSOR
☐ **$300**

- Sign with company logo displayed at sponsored hole
- Opportunity to set up a marketing table/activity at sponsored hole
- Logo included on all email blasts, social media posts/web content
- Website and social media recognition

PUTTING GREEN SPONSOR
☐ **$500**

- Company logo on sign at the putting green hole—signage provided

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Company Name: _____ **Email:** _____

Website: _____ **Phone:** _____

Contact Name: _____

Please make checks payable to: TPS Thayer | 1600 Hwy 6 Suite 100, Sugar Land TX 77478
Questions? Contact Jodi White | jwhite@tps.cpa | 713.922.5817

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REGISTRATION

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Reining Strength
THERAPEUTIC HORSEMANSHIP

Benefiting Reining Strength Therapeutic Horsemanship

☐ **INDIVIDUAL ENTRY $170**

Name: _____ **Phone:** _____

Email: _____

☐ **FOURSOME ENTRY $640**

Company/Contact Name: _____

Email: _____

Phone: _____

PLAYER 1

Name: _____ **Phone:** _____

Email: _____

PLAYER 2

Name: _____ **Phone:** _____

Email: _____

PLAYER 3

Name: _____ **Phone:** _____

Email: _____

PLAYER 4

Name: _____ **Phone:** _____

Email: _____

PAYMENT METHOD   ☐ **Check #** _____ **Name on check** _____

☐ **Credit Card** **(3% surcharge) AmEx | Visa | MasterCard | Discover**

Name on card _____ **Card Number** _____

Billing Address _____

Expiration Date _____ **3 Digit Code** _____

Signature _____