



2025 GOLF TOURNAMENT

Sponsorship Form

(please print)

Sponsoring Company: _____

Contact: _____

Address: _____ City: _____ State: _____ Zip: _____

Phone: _____ Email: _____

Sponsorship Options:
DEADLINE FOR SPONSORSHIP: APRIL 1, 2025

<input type="checkbox"/> Lunch \$2500* <i>(includes tee sponsor, signage & exhibit table at lunch)</i>	<input type="checkbox"/> Bloody Mary \$1100 <i>(your company name on bloody mary coupons distributed to attendees)</i>
<input type="checkbox"/> Golf Ball \$2000 <i>(your company name/logo on every tournament golf ball)</i>	<input type="checkbox"/> Beer Cart \$750* <i>(favorite on the course! includes beverages - 2 available)</i>
<input type="checkbox"/> Sunscreen \$2000 <i>(your company name/logo on every sunscreen container)</i>	<input type="checkbox"/> Margarita Cart \$700* <i>(1 available)</i>
<input type="checkbox"/> Hot Dog \$2000* <i>(includes signage, table and 2 chairs at hot-dog station. Your company name on hot dog coupons distributed to attendees)</i>	<input type="checkbox"/> Tee \$550* <i>(includes on-site representation, signage at the hole, table, 2 chairs)</i>
<input type="checkbox"/> Breakfast \$1500 <i>(includes signage, table, 2 chairs at check-in)</i>	<input type="checkbox"/> Green \$350 <i>(includes signage at the tee box. Does not include on-site representation)</i>
<input type="checkbox"/> Putting Contest \$750* <i>(includes signage, table, 2 chairs)</i>	* Two lunches included with sponsorship

Friday: May 9, 2025
Teal Bend Golf Club
 7200 Garden Highway, Sac, CA 95837

AGENDA:
 7:00am Registration/Driving Range
 7:30am Putting Contest Qualifying
 8:00am Tee Time
 1:45pm Putting Contest finals, lunch and raffle following play

I WOULD LIKE TO DONATE A RAFFLE PRIZE(S):

Contact me to pick up prize.
 I will bring it to the tournament.
 My prize will be: _____

All proceeds benefit the Sacramento District Dental Foundation

- Check Enclosed** (Payable to Sacramento District Dental Foundation)
- Credit Card**

Card #: _____ Exp Date: _____

Cardholder's Name: _____ CVV code: _____

Billing Address: _____

AMOUNT ENCLOSED: _____

Please add _____ additional lunches to my order (\$50 each)

By sponsoring the 2025 SDDS Swing for Smiles Golf Tournament, I agree to the rules and regulations of this event. For complete details, visit sdds.org.

Cancellation/Refund Policy: All cancellation requests must be made in writing and submitted to the SDDS no later than April 1, 2025. There will be a \$25 non-refundable processing fee for cancellations. Substitutions OK. No refund for cancellations or registrations received after April 1, 2025. Please return this form with payment or credit card information to SDDF: 2035 Hurley Way, Ste 200, Sacramento, CA 95825 • Phone (916) 446-1227 • Fax (916) 447-3818 • Email events@sdds.org

Raffle prizes, drinks on the course, contests and much more! All sponsors and raffle donors will be recognized in the golf program. SDDS invites you to play in our tournament — see reverse for details!