

Committee Members

Laura Bayoff-Elkins

Jack Brusewitz

Paul DeGriek

David Gorcyca

Jeffrey A. Hoppie

Bill Luther

Mike Maslyn

Joe Nirta

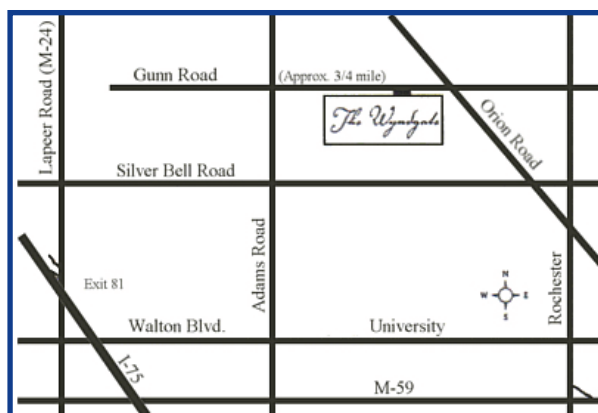
Wendee Rex

Matt Schmidt

Dave Sokol

Darin Weiss

HOUR
DETROIT



**1975 West Gunn Road
Rochester Hills, MI 48306
248-652-GATE**

Directions to The Wyndgate

North or South: I-75 to Lapeer Road M-24 (Exit #81) Merge onto Lapeer Road. Travel 2.4 miles; turn right onto East Silver Bell. Travel 1 mile turn left onto North Adams Road. Travel .75 miles turn right onto Gunn Road. Travel approximately 1/2 mile, The Wyndgate will be on the right.

East: M-59 West to the Rochester/Troy M-150 (Exit 11) Turn right onto South Rochester Road. Travel 4.8 miles; turn left on Orion Road. Travel 3.4 miles turn left on Gunn Road. Travel approximately 1/2 mile, The Wyndgate will be on the left.

West: Traveling from Square Lake and Telegraph Road. Heading East on Square Lake Road towards US-24 BR W. Square Lake Road becomes I-75 BL. East. Stay straight and go onto the I-75 North ramp, merge onto I-75 North. Travel 5.1 miles, take the Lapeer Road M-24 (Exit 81) Towards Lapeer, merge onto Lapeer Road. Travel 2.4 miles; turn right onto East Silver Bell Road. Travel 1 mile; turn left onto North Adams Road. Travel .75 miles; turn right onto Gunn Road. Travel approximately 1/2 mile, The Wyndgate will be on the right.

Serving those in need since 1942



Grace
Centers
of Hope™
35 E. Huron
Pontiac, MI 48342
Phone: 248-334-2187
Fax: 248-334-7939

www.gracecentersofhope.org

Grace Centers of Hope 13th Annual



*Supporting the Rehabilitation
Programs at Grace Centers of Hope*

Monday, August 23, 2010



11:00am Registration

12:30pm Shot Gun Start

5:00pm 19th Hole Dinner

\$175 per golfer

R.S.V.P. by AUGUST 13, 2010

Online Registration Also Available

www.gracecentersofhope.org

Corporate Sponsorship Packages

\$10,000 Title Sponsor



\$5,000 Dinner Sponsor

- Name and Logo on all event stationery
- Recognition in all media and promotional pieces (including radio and web advertisement)
- Complimentary Hole Sponsorship
- 1 Complimentary foursome
- Exclusive Corporate Banner recognition in dinner area

\$3,500 Lunch Sponsor



\$2,500 Beverage Sponsor



\$2,000 Beverage Cart Sponsor

(2 Needed)

- Name & Logo to be displayed on beverage cart
- Name & Logo to appear in all event stationery
- Recognition in all media and promotional pieces
- Complimentary twosome

Additional Sponsorships

\$1,750 Prize Sponsorship

- Name & Logo on all event stationery
- Recognition in all media & promotional pieces
- Complimentary Hole Sponsorship
- Complimentary twosome
- Corporate Banner recognition

\$1000 Corporate Sponsors

(18 available)

- Foursome Golfers Package
- Hole Sponsorship- Your Company's logo, name, & contact information will be advertised at hole

\$500 Flag Sponsorship

(18 available)

- Your Company's logo, name & contact information will be advertised on the pole on the green

\$250 Hole Sponsorship

(36 available)

- Your Company's logo, name, & contact information will be advertised at a hole

\$175 per Golfer (\$700 foursome)

- Green fees, covered carts
- Lunch, dinner, and refreshments
- 18-hole scramble
- Awards for winning team, favors, door prizes
- Bag drop service and all gratuities
- Fair Market Value: \$104.00

\$75 Dinner Only

Bring family & friends for dinner.

Online Registration Also Available

Please list the name(s) of the golfers participating in the golf outing below:

Name: _____

Phone Number: _____

Name: _____

Phone Number: _____

Name: _____

Phone Number: _____

Name: _____

Phone Number: _____

Please mail your registration to:

Grace Centers of Hope
c/o 12th Annual Golf Classic
35 E. Huron Street, Pontiac, MI 48342

R.S.V.P. by August 13, 2010

Sign me up for one of the following:

Sponsorship: _____

(Type of Sponsorship)

- I would like to golf or purchase a foursome.
- I cannot attend, but would like to make a donation.
- Dinner Only \$75 per person

Check Enclosed (payable to Grace Centers of Hope)

In the amount of \$ _____

Name _____

Address _____

City _____ Zip _____

Phone _____

E-mail _____

Credit Card Type:

MC _____ Visa _____ AmExp _____ Disc. _____

Credit Card# _____

Exp. Date: _____ Sec.Code: _____

If you have any questions please contact:

Shannon Grace Clark
Phone: 248-334-2187 Ext. 23
clarksg@gracecentersofhope.org

TEAR OFF and RETURN