



**TEE UP  
A HARVEST**  
AT RICH HARVEST FARMS

**SPONSOR PACKAGE REGISTRATION FORM**

For any questions, please contact Ramona Ustian at (630) 841-6660 or via email Ramona@ThomasCoffee.com  
**Tickets and Sponsorships are limited.** Please send in Registration Form with payment to secure your spot.  
 (Sponsor Participant Information due by September 1, 2017)

SPONSOR CONTACT INFORMATION	
Sponsorship Main Contact Name	
Sponsor Recognition	(How you would like name/corporation recognized? Attach logo in email please)
Main Contact Phone Number	
Main Contact Email	
Main Contact Mailing Address	

METHOD OF PAYMENT	
Please return completed forms with payment to: <b>Blessings in a Backpack</b> <b>4121 Shelbyville Road</b> <b>Louisville, KY 40207</b>	
Sponsor Package Amount	<input type="radio"/> Presenting Sponsor - \$35,000 <input type="radio"/> Eagle Sponsor \$25,000   Birdie Sponsor - \$15,000 <input type="radio"/> Food and Beverage Sponsor - \$5,000 <input type="radio"/> Par Sponsor - \$4,500 <input type="radio"/> PGA TOUR Professional Panel Sponsor - \$3,000 <input type="radio"/> Private Late Night Event Sponsor \$3,000 <input type="radio"/> Dessert and Coffee Bar Sponsor - \$1,000 <input type="radio"/> Silent Auction Sponsor - \$1,000 <input type="radio"/> Swag Bag Sponsor - \$1,000 <input type="radio"/> Welcome Basket Sponsor - \$1,000
Sunday Ticket(s)	\$350 per person _____ \$600 per couple _____
Donation	I am unable to attend but would like to sponsor _____ students with a gift of \$100 per student.
Check	Payable to <b>Blessings in a Backpack: "Tee Up a Harvest" on the memo line.</b>
Credit Card	<input type="radio"/> VISA <input type="radio"/> AMEX <input type="radio"/> MasterCard Account #: _____ Exp.: _____ 3 digit security code _____  Signature: _____
<i>As a 501c3, not-for-profit institution, gifts made to Blessings in a Backpack are tax-deductible to the extent allowed by law.            (Federal Tax ID #26-1964620).</i>	

**SPONSOR PARTICIPANT INFORMATION**

*Fill in what is applicable to your Sponsorship Package*

**Participant #1**

Name	
Phone	
Email	
Mailing Address	
Spouse/Guest Name Cell Phone Spa Services Preferred*	

**Participant #2**

Name	
Phone	
Email	
Mailing Address	
Spouse/Guest Name Cell Phone Spa Services Preferred*	

**Participant #3**

Name	
Phone	
Email	
Mailing Address	
Spouse/Guest Name Cell Phone Spa Services Preferred*	

**Participant #4**

Name	
Phone	
Email	
Mailing Address	
Spouse/Guest Name Cell Phone Spa Services Preferred*	

**\*Note** - List 2 preferred spa treatments, we will do our best to accommodate the group (facial, pedicure, massage or hair conditioning treatment & blow dry).