



Fox River Valley Dental Society

718 McKinley Avenue
Geneva, IL 60134
Phone: 630-232-4229 / Fax: 630-232-4240
e-mail: info@frvds.org

June 3, 2009, Golf Outing Sponsorship Request Form

Company Name _____

Contact Person _____ E-mail Address _____

Address _____

City _____ State _____ Zip _____

Phone _____ Fax _____

Level of Sponsorship Requested on Wednesday, June 3rd at The Aurora Country Club (check one):

- | | | |
|---|--|--|
| <input type="checkbox"/> Hole Sponsor
\$300.00 | <input type="checkbox"/> After-Six Sponsor
\$400.00 | <input type="checkbox"/> Premier Sponsor
\$500.00 |
|---|--|--|

Hole # Requested: _____ 2nd Choice: _____ 3rd Choice: _____

Sign should read as follows: "FRVDS Golf Outing
This hole sponsored by

Name(s) of representative(s) attending golf and/or dinner (Rep #1 free with "After Six" or "Premier"):

Rep #1: _____

Rep #2: _____

Rep #3: _____

Amount Enclosed:

Cost of sponsorship level requested: \$ _____

Cost of _____ additional reps to dine @ \$50 each: \$ _____

Cost of _____ additional reps to golf and dine @ \$150 each: \$ _____

Total Enclosed (make checks payable to Fox River Valley Dental Society) \$ _____

Mail completed form with payment to FRVDS, 718 McKinley Avenue, Geneva, IL 60134, **by Friday, May 8, 2009. Thank you for your support!**