



IIABKC Golf Classic

Harbour Pointe Golf Club, Mukilteo, WA

Friday, June 23, 2017 - Tee Off at 8:00 am

Sponsorship Opportunities

The 34th Annual Independent Insurance Agents & Brokers of King County Golf Classic will be held on Friday, June 23 at Harbour Pointe Golf Club.

Sponsorship opportunities are available and go fast, so reserve your's today.

Graphite Sponsorships - \$1,250 to \$1,700

Graphite Sponsors receive prominent logo placement on all tournament publicity including email marketing, sponsor banner, sponsorship recognition at one tee box, special recognition at the awards luncheon, and one foursome in the tournament. Graphite Sponsors also receive recognition as follows:

- **Cart Sponsors - \$1,700** – Prominent Logo Signage on the front of all golf carts
- **Luncheon Sponsor - \$1,700** – Logo on Sign at Luncheon
- **Scoreboard Sponsor - \$1,250** - Banner with Logo displayed at top of Scoreboard
- **Hole Signage Sponsor - \$1,250** - Prominent Logo Signage on all Holes

Carbon Steel Sponsorships - \$750

Carbon Steel Sponsors receive recognition on all tournament publicity including email marketing, sponsor banner, signage at one tee box, mention at the awards luncheon, and registration for two players in the tournament.

Hickory Sponsorships - \$450

Hickory Sponsors receive mention on all tournament publicity including email marketing, signage at one tee box, sponsor banner and mention at the awards luncheon.

In Kind and Donations less than \$250

Will receive recognition at our awards luncheon and as a prize sponsor.

Fill out the form below and send in with payment, or complete [online at www.iiabkc.org](http://www.iiabkc.org)

Contact Name: _____

Company: _____

Phone: _____ Email: _____

Please check which sponsorship opportunity you are interested in:

- Graphite Cart (\$1,700) Luncheon (\$1,700) Scoreboard (\$1,250) Signage (\$1,250)
 Carbon Steel (\$750) Hickory (\$450) Other (less than \$250) Prize

Total Amount enclosed/authorized: _____

Payment Method: Check MasterCard Visa

Credit Card Number: _____ Exp. Date _____ CVV: _____

Zip Code for Credit Card Billing Statement: _____

Name on Card: _____ Signature: _____

Mail to IIABKC office: 2815 Baker Avenue, Suite 105, Everett, WA 98201 or email dana@iiabkc.org