

Team Entry

Limit 1st 24 paid teams

\$50/person

\$200/team

\$30/cart if needed

4-Person Scramble

9 a.m. Shotgun Start

Saturday, July 29, 2017

Deadline: July 15
To ensure cart availability

Complete and make checks
payable to:

Fairbury Public Schools Foundation
703 K Street
Fairbury, NE 68352

Team Captain:

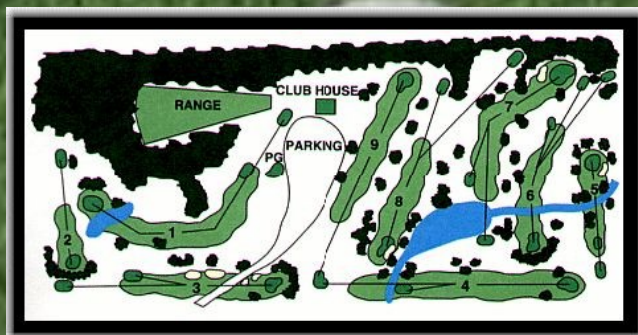
Phone:

Player #2: _____

Player #3: _____

Player #4: _____

_____ # of carts needed @\$30
(\$15/golfer)



*The Fairbury Public
Schools Foundation
appreciates your interest and
financial support to make this
event possible and to help
further the higher education
of our future leaders.*

*3rd Annual
Brian Starck
Memorial Golf
Tournament
Sponsored by Fairbury
Public Schools
Foundation*



*Fairbury Golf and
Country Club
July 29, 2017*

- 9 A.M. Shotgun Start
- 18-Holes with Multiple Flag Prizes
- 4-Person Scramble
- \$50/person, \$200/team
- Entry Fee Includes Green Fees, Boxed Lunch and a Small Gift



Sponsorship Opportunities

- Diamond Sponsor**—\$1,000
1 Golf Team & 2 Carts, Sponsorship Logo on all Materials, Flyers, Website & at 1 Hole
- Gold Sponsor**—\$500
1 Golf Team & 1 Cart, Sponsorship Logo on Flyers, Website & at 1 Hole
- Crimson Sponsor**—\$300
1 Golf Team, Sponsorship Logo @ 1 hole
- Hole Sponsorship**—\$75
Sponsorship Logo @ 1 Hole
- Flag Prize Donor** —\$30
Logo @ 1 Hole
- Raffle Prizes** - \$ or Donation
Recognition in the Clubhouse at the Conclusion of the Tournament
- Other Donation**
Recognition in the Clubhouse at the Conclusion of the Tournament
- I recognize the Foundation's efforts to raise money for this worthy cause. I would like to make a donation in the amount of \$_____



All money raised from this tournament will go to the Fairbury Public Schools Foundation and will be used for scholarships and awards for graduating seniors from Fairbury High School.

The Foundation is a 501c3 organization making all donations tax deductible. Receipts available upon request.

Foundation Donation

Thank you for your gift. Your contribution will support the Fairbury Public Schools Foundation.

Name: _____

Class of: _____

Address: _____

City: _____

State: _____ Zip: _____

If you have a fund preference, please check the appropriate box:

- Unrestricted Foundation Funds
- Scholarship Fund _____
- Other Special Fund _____

In honor/memory of _____

- Honor a Family Member
- Honor a Classmate
- Honor a Teacher
- Leave a Legacy

Mail all sponsorship/donation checks and registration forms to:

Fairbury Public Schools Foundation
703 K Street
Fairbury, NE 68352

Fairbury Public Schools Foundation Scholarship Fund