

**AENC 30th Annual Golf Outing & Reception
SPONSOR & DONATION FORM**



Monday, September 11, 2017 – Shotgun Start 9:30 AM — Reception 3:00 – 4:00 PM

River Ridge Golf Course

3224 Auburn Knightdale Road, Raleigh, NC 27610 (919) 661-8374

Person completing the form _____

Email _____ Phone (_____) _____

Sponsoring Organization _____

Mailing Address _____

City _____ State _____ Zip Code _____

Please check the appropriate box for sponsorship and/or donation. Please read the Sponsor Rules and Regulations attached to this form. Sponsorships are accepted based on date of receipt of payment. All sponsorships must be paid by September 1. Questions: Contact Jovita Mask, AENC, (919) 848-8255 or jovita@aencnet.org.

SPONSORSHIPS

Sponsorship for items marked with an * includes 1 table, 2 chairs, sign, use of 1 cart, 3 tickets for continental breakfast, box lunch and reception. Tents, additional chairs and tables can be rented from our preferred vendor: CE Rentals: (919-833-9743 - John Bradford, CSEP) Other sponsorships include continental breakfast, box lunch, and reception tickets, plus any special items listed for those sponsorships.

If you select a hole sponsorship, review the information concerning special hole contests on page 2, Rules & Regulations before listing your choice.

	Cost	Ready At	Amount Due
<input type="checkbox"/> *Hole sponsorship – 18 available Hole request choice 1 st _____ 2 nd _____ 3 rd _____	\$525	9:00 AM	\$ _____
<input type="checkbox"/> *Beverage cart – 2 available	\$525 plus your cost for providing beverage/ice	9:00 AM	\$ _____
<input type="checkbox"/> *Driving Range – 1 available	\$525	8:30 AM	\$ _____
<input type="checkbox"/> *Putting Green – 1 available	\$525	8:30 AM	\$ _____
<input type="checkbox"/> *Scoreboard – 1 available	\$525	9:00 AM	\$ _____
<input type="checkbox"/> *Bag Drop – 1 available	\$525	8:30 AM	\$ _____
<input type="checkbox"/> *19 th Hole Reception Co-Sponsor – 2 available	\$750 (Exclusive \$1500) – Display table/recognition at Reception		\$ _____
<input type="checkbox"/> *Box Lunch Sponsorship – 2 available	\$500 (Exclusive \$1000) – Logo label on box lunches		\$ _____
<input type="checkbox"/> Golf Outing Program – 1 available \$750 (includes ½ page ad)			\$ _____
<input type="checkbox"/> Welcome Bags – 1 available Sponsor provides 100 bags with your company logo to distribute to golfers.	\$250 plus you provide bags	Sept. 1	\$ _____

DONATIONS

Top Team Prizes – First, Second, and Third Place Teams will be announced and prizes awarded at the 19th Hole Reception. Prizes must consist of 4 items (all the same, one for each golfer in the foursome). List your item(s) and description below and their value.

_____ \$ _____

Reception Door Prize _____ \$ _____

Goodies for Welcome Bags _____ \$ _____

PAYMENT

As sponsor/donor, I have read and agree to abide by the rules and regulations on page 2.

Signed _____ **Date** _____

Cancellation must be received in writing before 5 PM on September 1 to receive a refund. Send completed form and payment. Mail: AENC, 434 Fayetteville St., Suite 1850, Raleigh, NC 27601 | Fax (919) 848-8525 | Email: jovita@aencnet.org

Payment: \$: _____ [] Check payable to AENC [] MasterCard [] VISA [] American Express [] Discover

Card Number _____ Exp. Date _____

Name on Card _____ Security Code _____

Billing address for card if different from above _____

City _____ ST _____ Zip _____

Email for credit card receipt _____

AENC 30th Annual Golf Outing & Post Golf Reception

Sponsor & Donation Form – Rules and Regulations (Page 2 of 2)

As a sponsor/donor, you agree to abide by these rules and regulations. Please read carefully.

Set Up and Break Down (Sponsors for Holes, Driving Range, Putting Green, Scoreboard, Beverage Cart, Bag Drop):

Sponsors must be ready by the time listed on the form and must not dismantle until after the final foursome has completed their round. If you rent a tent, it will be set up in advance so you can begin putting up your displays at 8:30 AM on Monday morning. If your sponsorship includes a cart, it will be available after you check in at the registration table.

Food & Beverages: Players and sponsors get a light continental breakfast, box lunch and the 19th Hole Reception.

Sponsors are encouraged to provide snack food/beverage at their holes during the day. You may bring your own beverages.

Alcoholic beverages are limited to beer & wine. No other alcoholic beverages are permitted. You may bring your own food/ice to the course. You should bring all the ice you need with you to the course.

Post Golf 19th Hole Reception/awards/prizes: Sponsors will receive 3 tickets for the post golf reception. Additional reception tickets are available to sponsors for \$25 each and must be purchased in advance. The reception will provide an opportunity to expand your networking opportunities. Non-profit association CEOs and staff who may not be playing golf will be invited to attend the reception following golf.

Sponsorship displays and/or signs will be limited to the sponsor's designated hole/driving range/cart, etc. Sponsor displays are subject to the approval of the AENC Golf Committee and River Ridge. We reserve the right to relocate or adjust displays for the benefit of the sponsor or betterment of the tournament.

Liability: Sponsors assume liability for any and all damage of the golf course property on their assigned holes/driving range/putting green/golf carts.

Dress Code: River Ridge has a spikeless policy; denim of any kind is prohibited; all shirts must have collars and shirt tails must be tucked in.

Sponsors for Holes with Special Contests:

Sponsors on a hole which has a special contest are required to provide a prize for the contest winner on that hole. The sponsor needs to provide a detailed description of the prize to AENC by September 1. Refer to the list below. Prizes will be awarded during the reception. Prizes can be a sleeve of balls, gift cards or similar items with the exception of the hole in one. Call AENC if you are interested in sponsoring this hole/contest.

<u>Contest</u>	<u>Hole #</u>	<u>Par</u>
• Closest to the Pin – Men	#15	3
• Closest to the Pin – Women	#2	3
• Longest Drive – Men	#3	5
• Longest Drive – Women	#18	5
• Straightest Drive – Men & Women	#12	12 (two prizes)

Rules:

To prevent injury to yourself or others and in consideration of those playing golf, follow these rules.

- Be sure you are at least 20 feet from anyone swinging a golf club, whether for practice or striking the ball.
- Do not move, talk or stand close to or directly behind or in front of the ball or hole when a player is addressing the ball or making a shot.
- During the event, please stay in your assigned location as much as possible.
- If you must leave your location, please stay on cart paths.
- When driving on the car paths, be very aware of where golfers are on all adjacent holes.
- If you see someone preparing to hit a shot in your general direction or near your location, stop until they are finished. Your movement or talking will distract them, cause delays in play and could cause you or others nearby to be injured.

Overnight Accommodations Reservations:

[Embassy Suites by Hilton Raleigh/Durham Research Triangle - Directions](#)

201 Harrison Oaks Blvd., Cary, NC 27513 (919) 77-1840 Rate: \$119/night plus taxes Ask for AENC Golf Rate

Deadline: August 11, 2017 or as long as block is available (Nights of 9/10 and 9/11 2017)

The hotel is located 20 miles (25 minutes) from Hotel to River Ridge Golf Course. Add an **extra** 15 minutes to normal driving time due to early morning traffic.

AENC 30th Golf Outing ~ September 11, 2017, River Ridge, Raleigh, NC (page 1 of 2)

◆Tournament ◆Introduction to Golf Clinic ◆19th Hole Reception

Register for the Tournament, Introduction Golf Clinic and/or the Reception. The reception is included in the tournament and clinic registration. **Golf Tournament Registration closes on September 1st.** Golf Format: Captains Choice with 10:00 AM Shotgun Start. You are encouraged to put together your team of associates, clients, or friends, or you are welcome to register as a single and we'll put you on a team.

Questions: contact Jovita Mask, AENC, (919) 848-8255 or jovita@aencnet.org

PERSON COMPLETING THE FORM: (COMPLETE both pages if you are registering more than one person to play in the tournament). If you are registering just yourself, you only need to complete this page.

First Name _____ Last Name _____ Informal First Name _____

Email Address _____ Phone (_____) _____

Company _____ Address _____

City _____ ST _____ Zip _____

Handicap or last 5 scores _____ Food Allergy/Special Needs _____

GOLF TOURNAMENT PLAYER(S) REGISTRATION – Complete page 2 as well (9:30 AM SHOTGUN START)

If you are registering more than one person, list your information as Player #1 on page 2. If you are putting together a team, please confirm that the individual(s) listed know they are on your team before completing this form. Indicate on page 2 if you are paying for them or if they are paying for themselves.

Monday Golf Fee includes: green fee, cart, morning coffee, box lunch, 19th Hole Reception, 2 mulligans, prize entry.

	<u>Before August 31 – 5 PM</u>	<u>After August 31</u>	<u>Amount Due</u>
AENC Member	\$135	\$145	\$ _____
AENC Non Member	\$150	\$160	\$ _____

INTRODUCTION TO GOLF CLINIC REGISTRATION (2:00 PM – 3:00 PM)

If you wish to participate in the Golf Clinic and the 19th Hole Reception, complete the information above and pay the appropriate fee below. You do NOT have to complete page 2.

Fee includes Clinic and the 19th Hole Reception. Golf clubs and balls will be provided for the clinic.

AENC Member \$25 - Non-Member \$35 \$ _____

19TH HOLE RECEPTION ONLY (3:00 PM – 4:00 PM)

The reception is open to anyone who is [registered for the tournament](#) or [the golf clinic](#), is a [golf sponsor](#) or [who works for an association](#). If you qualify, there is no charge but you must register by checking this box and completing the information above.

PAYMENT MUST ACCOMPANY REGISTRATION:

TOTAL AMOUNT \$ _____

Cancellation Policy: Cancellation must be in writing and received at the AENC office no later than 5 PM on **September 1** to receive a refund.

No-shows will not be refunded. You may substitute a player. Send pages 1 and 2 (if needed) to AENC

FAX: (919) 848-8255 **EMAIL:** jovita@aencnet.org **MAIL:** AENC, 434 Fayetteville St., Suite 1850, Raleigh, NC 27601

Check payable to AENC Master Card VISA American Express Discover

TOTAL AMOUNT \$ _____ (include totals from page 2)

Card Number _____ Expiration Date _____

Name on Card _____ Security Code _____

Billing Address for Card If Different from above _____

City _____ State _____ Zip Code _____

Signature _____ Date _____

Email credit card receipt to _____



GOLF TOURNAMENT PLAYER REGISTRATION
AENC Golf Outing, September 11, 2017 – River Ridge, Raleigh, NC

Name of person completing this form: _____

Fill this out for any and all players on your team. Please let us know if you are paying for them OR if they will be paying for themselves separately and should be invoiced. Put only the amounts that you are paying for on Page 1.

Player # 1 - If you are registering more than one person, list yourself as Player # 1

WHO IS PAYING? I am paying for them. They are paying. Member \$_____ Non-Member \$_____

First Name _____ Last Name _____ Informal First Name _____

Handicap or last 5 scores _____ Food Allergy/Special Needs _____

Email Address _____ Phone (_____) _____

Company _____ Address _____

City _____ ST _____ Zip _____

Player # 2

WHO IS PAYING? I am paying for them. They are paying. Member \$_____ Non-Member \$_____

First Name _____ Last Name _____ Informal First Name _____

Handicap or last 5 scores _____ Food Allergy/Special Needs _____

Email Address _____ Phone (_____) _____

Company _____ Address _____

City _____ ST _____ Zip _____

Player # 3

WHO IS PAYING? I am paying for them. They are paying. Member \$_____ Non-Member \$_____

First Name _____ Last Name _____ Informal First Name _____

Handicap or last 5 scores _____ Food Allergy/Special Needs _____

Email Address _____ Phone (_____) _____

Company _____ Address _____

City _____ ST _____ Zip _____

Player # 4

WHO IS PAYING? I am paying for them. They are paying. Member \$_____ Non-Member \$_____

First Name _____ Last Name _____ Informal First Name _____

Handicap or last 5 scores _____ Food Allergy/Special Needs _____

Email Address _____ Phone (_____) _____

Company _____ Address _____

City _____ ST _____ Zip _____