

GOLF SPONSORSHIP FORM

Benefits	Beverage Cart Sponsor \$600 (Maximum 2 Sponsors)	Closest to the Pin Sponsor \$150 (Maximum 2 Sponsors)	Longest Drive Sponsor \$150 (Maximum 2 Sponsors)	Hole Sponsor \$100
Logo on signage on beverage cart	■			
Logo on signage at the golf event	■	■	■	■
Opportunity to provide company swag for golfer gift bag	■	■	■	■
Recognition at award ceremony	■	■	■	

When

Tuesday, July 16, 2018
7:00 am – Registration
8:00 am – Shotgun Start

Where

Brookmeadow Country Club
 100 Everendon Road
 Canton, MA 02021

Deadline

Sponsorship must be received by
June 15, 2018.

Golf Contact

Amelie Lonczak
 Tel: +1 (413) 219-5561
 Email: amelie.lonczak@gmail.com

ICSC Contact

Nicolette Iervasi
 Tel: +1 646 728 3511
 Email: niervasi@icsc.org

Return Completed Form and Payment to

ICSC 2018 New England Conference &
 Deal Making Sponsorship
 P.O. Box 419822
 Boston, MA 02241-9822
 Fax: +1 732 694 1800
 Email: niervasi@icsc.org

Reminders

- Payment by credit card or check payable to ICSC must be submitted with this form.
- Email your company logo (.jpeg and .eps format) to Nicolette Iervasi at niervasi@icsc.org | Tel: +1 646 728 3511

Terms, Conditions and Rules

This sponsorship application is subject to the Terms and Conditions for ICSC Sponsorship/Advertising Opportunities available at www.icsc.org/event-terms-and-conditions, which are hereby incorporated by reference.

Please Check One: Beverage Cart Closest to the Pin Longest Drive Hole Sponsor

Name _____ Title _____

Company _____

Address _____

City _____ State/Province _____ Zip/Postal Code _____

Telephone _____ Fax _____

Email _____ Your Membership I.D. # _____ (2018NE-S)

RRQUIRED FOR NON-U.S. APPLICANTS: _____ Date of Birth _____ Country of Citizenship _____

Please check here if any of the above information has recently changed.

Method of Payment (No cash accepted in advance)

Check made payable to ICSC enclosed for \$ _____ MasterCard Visa AMEX Discover \$ _____

Name (as it appears on credit card) _____ Signature _____

Credit Card Number (include all digits) _____ Expiration Date (month/year) _____