

21st ANNUAL GOLF TOURNAMENT

BENEFITING THE PATIENTS OF



MONDAY, OCTOBER 30th, 2023 | 12:30 PM START

West Orange Country Club
3300 West Orange Country Club Dr
Winter Garden, FL 34787



Our Mission

The mission of Community Health Centers, Inc. is to provide quality and compassionate primary healthcare services to Central Florida's diverse communities.

Your Gift Makes a Difference!

Last year, our health centers provided medical care to over 60,000 Central Floridians who otherwise would not have access to affordable healthcare. Thanks to generous advocates like you, we were able to provide essential medical services to underserved babies, children, adults, and senior citizens in our community.

Your contribution can make a significant impact on the lives of those in need. With your investment in our mission, we can continue to offer our sliding discount program to uninsured patients, who often have no coverage from their employer, are temporarily without work, or have insurance but cannot afford their deductibles. Your donation will directly support healthcare delivery to patients with the greatest needs and the least amount of financial resources.

Our goal is to provide high-quality care to everyone in our community, regardless of their financial situation or insurance status. Your support will help us achieve this goal and ensure that more patients have access to affordable healthcare. Each year, the demand for our health services continues to grow. The funds raised from our tournament will enable us to expand our services and reach even more patients who need our help.

We are committed to assessing the needs of our community regularly, especially the children, families, and seniors who do not have access to affordable healthcare. With your generosity, we can continue to provide essential medical services and make healthcare more accessible throughout Central Florida.

Thank you for considering supporting our annual fundraiser. Your contribution will make a significant difference in the lives of those we care for, and we are incredibly grateful for your support.

Sponsorship Opportunities

PRESENTING SPONSOR - \$10,000

- Recognition as the Presenting Sponsor in all promotion before, during, and post-event
- Complimentary two foursomes (eight players)
- Opportunity to have presentation area before and during the tournament
- Corporate logo on the sleeve of event golf shirts (160 total)
- Recognition and formal presentation at Awards Dinner
- Link to company website on the golf tournament webpage
- Corporate logo on the post-event team photos

HEALTHCARE CHAMPION - \$7,500

- Recognition as a Healthcare Champion in all promotion before, during, and post-event
- Complimentary two foursomes (eight players)
- Corporate logo on the sleeve of event golf shirts (160 total)
- Recognition at Awards Dinner
- Link to company website on the golf tournament webpage
- Corporate logo on the post-event team photos

LUNCH & AWARDS DINNER SPONSOR - \$6,500

- Recognition as either a Lunch & Awards Dinner Sponsor in all promotion before, during, and post-event
- Complimentary two foursomes (eight players)
- Special Recognition at Awards Dinner
- Link to company website on the golf tournament webpage
- Corporate logo on the post-event team photos

EAGLE SPONSOR - \$5,000

- Recognition as an Eagle Sponsor in all promotion before, during, and post-event
- Complimentary foursome
- Recognition at Awards Dinner
- Link to company website on the golf tournament webpage
- Corporate logo on the post-event team photos

BIRDIE SPONSOR - \$2,500

- Recognition as a Birdie Sponsor at the event
- Complimentary foursome
- Recognition at Awards Dinner
- Link to company website on the golf tournament webpage
- Corporate logo on the post-event team photos

CORPORATE SPONSOR - \$1,000

- Recognition as a Corporate Sponsor at the event
- Complimentary foursome
- Listed as a Corporate Sponsor on the golf tournament webpage
- Company name listed on the post-event team photos

HOLE SPONSOR - \$300

- Recognition with a Hole Sign on a Tee Box
- Listed as a Hole Sponsor on the golf tournament webpage



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TEAM INFORMATION

Company Name: _____

Contact: _____ Phone: _____

Address: _____ E-Mail: _____

City: _____ State: _____ Zip: _____

PLAYER INFORMATION

Player #1: _____ Player #3: _____

Player #2: _____ Player #4: _____

SPONSORSHIP LEVEL:

- ☐ Presenting - \$10,000
- ☐ Healthcare Supporter - \$7,500
- ☐ Lunch & Awards Dinner - \$6,500
- ☐ Eagle - \$5,000
- ☐ Birdie - \$2,500
- ☐ Corporate - \$1,000
- ☐ Hole - \$300

PAYMENT METHOD:

- ☐ Check ☐ AMEX ☐ MC
- ☐ Visa ☐ Discover

Card Number: _____

Exp. Date: _____ Security Code: _____

Signature: _____

PLEASE MAIL OR E-MAIL THIS FORM WITH PAYMENT TO:

Community Health Centers, Inc.
Development Department
110 S Woodland St, Winter Garden, FL 34787

QUESTIONS? CONTACT

407-905-8827, x1050
j.riordan@chcfl.org

Community Health Centers, Inc. is a Non-Profit 501(c)(3) Healthcare Organization. Our Tax ID Number is 59-1480970

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