



FOR THE FAMILIES OF RMHC-EIWI

June 4, 2018 Event & Sponsorship Registration

1. Event Registration

*Contact/Gofer #1: _____

*Email: _____

Phone #: _____

Business Name: _____

*Address: _____

*City/St./ Zip: _____

**Required Fields*

Please Select your Registration Type

\$150 – Individual Golfer

\$600 – Add Team

If registering a team, please list all remaining golfer's names below.

Golfer #2: _____

Golfer 3#: _____

Golfer #4: _____

2. Sponsorship Registration

*Business: _____

*Contact: _____

*Email: _____

*Phone #: _____

*Address: _____

*City/St./Zip: _____

\$10,000 – Presenting

\$5,000 – Platinum

\$3,500 – Gold

\$1,000 – Silver

\$500 – Bronze

PLEASE NOTE: Heather Wilson, Development Director, will follow up on sponsorship and/or team information with the contact person listed above.

**Required Fields*

3. Payment Information

Total Amount: \$ _____

Check Enclosed Send Invoice

Credit Card # (Visa/MC)

Expiration Date: _____ CVC: _____

Please Return Form & Payment to:

Ronald McDonald House Charities of Eastern Iowa and Western Illinois
Attn: Heather Wilson

730 Hawkins Dr. Iowa City, IA 52246

P: 319.834-5852 F: 319.356.6873

hwilson@rmhc-eiwi.org

Online registration available at www.rmhc-eiwi.org