



Name/Business Name: _____

Address: _____

Email: _____

*Hole Sponsorship \$100 _____

Name on Hole Sponsorship Sign: _____

*Beverage Cart Sponsorship \$500 _____

Name on Beverage Cart Sign: _____

*Bloody Mary Bar Sponsorship \$500 _____

Name on the Bloody Mary Bar Sign: _____

please send a PDF or JPG if you would like your business logo on the sign

*General donation: _____

Value and description of your donation: _____

Please make checks payable and send to:

Michael S. DeLarco Foundation

405 Langley Court

Schaumburg, Illinois 60193

708-558-0562

michaeldelarcofoundation@gmail.com

www.michaeldelarcofoundation.org

TAX ID #26-0083479