

HCCH Foundation Golf Tournament

JUNE 21, 2024

9:00 AM

Bethany Country Club

29398 US Hwy 69

Bethany, MO 64424



*Harrison County
Community Hospital*
HCCH

\$2,100 in Cash Prizes

\$25,000 Hole-in-One



HCCH Foundation Golf Tournament

Bethany Country Club 29398 Highway 69 Bethany, Mo.

GOLFER REGISTRATION

FORMAT

18 Holes
2-Person Scramble

SCHEDULE

FRIDAY, JUNE 21, 2024

8:00 am Registration begins

9:00 am Shotgun start

Midday Lunch

Post-Play Hors d'oeuvres and prizes at the clubhouse

PRIZE PAYOUT

\$2,100 in 3 Flights

1st Place: \$400

2nd Place: \$200

3rd Place: \$100

HOLE-IN-ONE

\$25,000 cash and other great prizes

REGISTRATION

\$100 per person / **\$200** per team

Includes:

18 holes of golf
Lunch and snacks
Beverages
Giveaways
Chance to win great prizes

SPONSORSHIPS

PLATINUM \$2,000+

Complimentary registration for two teams
Complimentary golf cart use (if needed)
Logo in the program
Signage in the clubhouse
Listing in thank you ads

GOLD \$1,000

Complimentary registration for one team
Complimentary golf cart use (if needed)
Logo in the program
Signage in the clubhouse
Listing in thank you ads

SILVER \$500

Complimentary registration for one team
Logo in the program
Signage in the clubhouse
Listing in thank you ads

TEE BOX \$250

Signage at the clubhouse
Listing in the program & thank you ads

FRIEND \$100

Signage at the clubhouse
& thank you ads

Questions? Call (660) 425-0292 or email abbe.ream@hcchospital.org

2024 SPONSORSHIP

Yes! I want to be a tournament sponsor at the following level:

Platinum \$2,000+ **Gold** \$1,000 **Silver** \$500 **Tee Box** \$250 **Friend of the Foundation** \$100

Sponsor Name:
Mailing Address:
City, State, ZIP Code:
Phone Number:
Primary Contact Person:
Email:

Sponsorship:

\$ _____

TEAM REGISTRATION

Yes! want to play in the tournament!

<input type="checkbox"/> GOLFER 1:
Mailing Address:
City, State, ZIP Code:
Phone Number: Email:

Registration:

\$100 per person

\$200 per team

\$ _____

FREE

*for Platinum, Gold,
or Silver
Sponsors*

<input type="checkbox"/> GOLFER 2:
Mailing Address:
City, State, ZIP Code:
Phone Number: Email:

GOLF CART RENTAL

Golf carts are available for a rental fee of \$50.

Yes, we will need a rental golf cart.

No, we will not need a rental golf cart.

Sponsorship and Team Registration Deadline will be *Monday, June 3.*

Cart Rental:

\$ _____

Free

*for Platinum or
Gold Sponsors*

Make checks payable to *Harrison County Community Hospital Foundation.*

Send this form and payment to:

Abbe Ream, HCCH Foundation, 2600 Miller Street, Bethany, MO 64424

AMOUNT DUE:

\$

Proceeds benefit Harrison County Community Hospital Foundation, a 501(c)(3) nonprofit organization.
Contributions are tax deductible to the full extent allowed by law.

Proceeds from the Golf Tournament benefit Harrison County Community Hospital Foundation, a 501(c)(3) nonprofit organization. Foundation donations have provided equipment the hospital staff needs to provide exceptional care for residents of our rural communities. Recent donations from the Foundation have included defibrillators, two patient transport vans, cardiac rehabilitation equipment, physical therapy equipment, an oven and steam table for the kitchen, artwork for the hospital, and inpatient room furniture.

Thank you sponsors and golfers!



**HCCH Foundation
2600 Miller Street
Bethany, MO 64424**

Enjoy a fun day of golf while supporting a great cause!

