



BENEFITING
DAVID LAWRENCE
CENTERS
FOR BEHAVIORAL HEALTH®



SPONSORSHIP OPPORTUNITIES



October 21, 2022

Quail Creek Country Club | 13300 Valewood Dr. Naples, FL 34119

LEARN MORE AT:
ChipInForDLC.org

Sponsorships are available.
Contact donorcare@DLCenters.org for more information.

Underwriting Sponsor Opportunities

Greens Fee Sponsor - \$3000.00

- Company logo included in advanced marketing – pending print deadlines
- Recognition from podium at event before player send off
- Company logo/name on event webpage
- Recognition on Sponsor Board at registration
- Company logo/name signage on the course
- One (1) foursome to play in tournament
- Listing in DLC Annual Report

Golf Cart Sponsor - \$1750.00

- Company logo included in advanced marketing – pending print deadlines
- Recognition from podium at event before player send off
- Company logo/name on event webpage
- Company logo/name on all golf cart player plaques [In Partnership w/]
- Listing in DLC Annual Report

Beverage Cart Sponsor - \$1000.00

- Company logo included in advanced marketing – pending print deadlines
- Company logo/name on event webpage
- Company logo/name on beverage cart
- Listing in DLC Annual Report

Hole Sponsor - \$500.00

- Signage at two (2) holes
- Listing in DLC Annual Report

Name Plaque Sponsor - \$300.00

- Company logo on all golf cart player plaques
- Listing in DLC Annual Report



(239) 455-8500 | 6075 BATHEY LANE | NAPLES, FL 34116 | WWW.DLCENTERS.ORG

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Chip In Commitment Form

October 21, 2022 | Quail Creek Country Club

18 Hole Scramble

Registration & Lunch 11:30 a.m. | Tee-off 1:00 p.m. | Awards Reception 5:30 p.m.

Sponsorship and Registration- Please Select:

- ☐ Hole Sponsor - \$500.00
- ☐ Name Plaque Sponsor - \$300.00
- ☐ Beverage Cart Underwriter - \$1000.00
- ☐ Golf Cart Underwriter - \$1750.00
- ☐ Green Fees Underwriter- \$3000.00

Company/Registrant Name: _____

Name as it should appear on marketing materials: _____

(please send high resolution logo to donorcare@dlcenters.org)

Address _____

Phone _____ Email: _____

Website: _____

Payment Type:

Please charge my: ☐ Visa ☐ Mastercard ☐ Discover ☐ American Express

Name on Card (please print) _____

Card Number _____ CW: _____ Exp. Date _____

Signature _____

Mail this form with a check made payable to: David Lawrence Centers,
Attn: Development, 6075 Bathey Lane, Naples, FL 34116.

For more information and to register, please visit www.chipinforDLC.org
Questions? Contact Briana Shipe Karaszi at brianask@dlcenters.org or at
239-354-1419



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