

21st Annual Visionary Golf Tournament

Monday, September 14, 2020

To benefit the Northeastern Association of the Blind at Albany (NABA)

Wolferts Roost Country Club, Albany, New York

11 AM Registration and lunch, 12:30 PM Shotgun Start, 5:30 PM Cocktail hour and dinner

Visionary Presenting Sponsor - \$3,500

- 2 foursomes to include lunch, cocktail hour and dinner
- Sponsor 2 blind golfers for the day
- Sponsorship highlighted on the promotional materials and the program
- Banner and signage on display at registration and in the dining room
- Recognition on the favors to be distributed to each golfer
- Recognition on 2 tee signs and 2 pin flags
- Recognition on NABA [website](#) and our social media platforms



Course Sponsor - \$2,500

- 2 foursomes to include lunch, cocktail hour and dinner
- Sponsor 1 blind golfer for the day
- Sponsorship highlighted on the promotional materials and the program
- Banner and signage on display around the putting green area and dining room
- Recognition on 1 tee sign and 1 pin flag on the course
- Recognition on NABA [website](#) and our social media platforms



Open Sponsor - \$1,500

- 1 foursome to include lunch, cocktail hour and dinner
- Sponsorship highlighted on the promotional materials and program
- Signage with your logo on display along the golf cart path
- Recognition on 1 tee sign

Beverage Station Sponsor - \$750

- Signage with your logo displayed at the tournament beverage station
- Sponsorship highlighted on the promotional materials and the program
- 2 reservations for the cocktail hour, dinner and evening program

Putting Green Sponsor - \$500

- Signage at the putting green featuring your firm as the sponsor
- 1 reservation for the cocktail hour, dinner and evening program

Pin Flag Sponsor - \$250

- Your logo on a pin flag

Tee Sponsor - \$200

- Your logo displayed at a tee box

Individual Golfer is \$200 per person
Under 35 years of age is \$180 per person
Dinner only is \$75 per person

21st Annual Visionary Golf Tournament Sponsorship Registration

Company Name: _____
(as you would like it to appear in printed materials)

Contact: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Email: _____

Please email your company logo in EPS high resolution format to:
gnessney@naba-vision.org

By June 26, 2020, to be included in the invitation

We are proud to be a _____ sponsor at \$ _____ level

Payment Options:

___ Enclosed is a check for \$ _____ (Please make checks payable to NABA)

___ Please Invoice my company for \$ _____

___ Please charge : American Express ___ Discover ___ Mastercard ___ Visa ___

Amount \$ _____ Card #: _____ Exp: _____

3 Digit Security Code: _____ (back of card) For AmExp - 4 Digit Code: _____ (front of card)

Signature: _____ Name on Card : _____

Card Billing Address (if different from above) : _____

City: _____ State: _____ Zip: _____

Please mail this form with payment to:
Northeastern Association of the Blind at Albany, Inc. (NABA)
301 Washington Avenue · Albany, NY 12206

Attn: Michele Puleo O'Hare or Gail A. Hessney

Phone: (518) 463-1211 ext. 241 or 201 | Fax : (518) 463-5883

More Information about NABA and our special events can be found at www.naba-vision.org

Thank you for your support!