

**TEXAS GLASS ASSOCIATION**  
**2012 TGA Golf Open and Charity Fund Tournament**  
**SPONSORSHIP OPPORTUNITY**

*SilverHorn Golf Club of Texas*

April 11, 2012 – Wednesday

11:30 a.m. Registration      1:00 pm Shotgun Start

**Titanium**

**\$5000.00**

- Signage and recognition at Tournament and TEXpo
- Company name and logo on players framed photo
- Receive one 4-player golf team
- Opportunity to include a brochure or logo item in each players registration gift bag
- Includes 1 Hole Sponsorship
- TEXpo attendee list
- TGA Website listing as a Titanium Golf Sponsor

Company Name \_\_\_\_\_

Contact Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Email \_\_\_\_\_ Phone \_\_\_\_\_

- Titanium      \$5000.00
- Gold            \$2500.00
- Silver          \$1500.00
- Hole            \$200.00
- Other          \$\_\_\_\_\_

**Gold**

**\$2500.00**

- Signage and recognition as a Gold Sponsor at the Tournament and TEXpo
- Company name / logo will be on a golf glove that will be given to players
- Receive one 4-player golf team
- TEXpo attendee list
- TGA Website listing as a Gold Sponsor

*With this contribution we wish to support the TGA Golf Open & the Central Texas Fire Victims .*

**Silver**

**\$1500.00**

- Signage and recognition at Tournament and TEXpo
- Receive one 4-player golf team
- TEXpo attendee list
- TGA Website listing as a Silver Sponsor

**Golf Team (4 players) Information**

Player Name: \_\_\_\_\_ Handicap \_\_\_\_\_

Company : \_\_\_\_\_

Player Name: \_\_\_\_\_ Handicap \_\_\_\_\_

Company : \_\_\_\_\_

Player Name: \_\_\_\_\_ Handicap \_\_\_\_\_

Company : \_\_\_\_\_

Player Name: \_\_\_\_\_ Handicap \_\_\_\_\_

Company : \_\_\_\_\_

**Hole Sponsor**

**\$200.00**

- Signage on one hole as the hole sponsor
- Pre-registration list & post even attendee listing
- Posting on TGA Website as an Hole Sponsor

Mail Sponsor form and payment by **March 5, 2012** to TGA, P O Box 170125, Austin, TX 78717.

**PAYMENT INFORMATION**

**AMOUNT: \$ \_\_\_\_\_**

- Check enclosed    Or Credit Card:  VISA     MasterCard     AMX     Discover

\_\_\_\_\_  
Name on Card

\_\_\_\_\_  
Card Number

\_\_\_\_\_  
Exp.

\_\_\_\_\_  
CVV #

Billing Address \_\_\_\_\_ City, St. Zip \_\_\_\_\_