

# LAHU GOLF OUTING

**Monday,  
September 23, 2019**

## **Greystone Country Club**

9461 St Andrews  
Denham Springs, LA

**11:00am Registration & Lunch**

**12:00pm Shotgun Start**

**(4-Player Scramble)**

Hot Meal & Awards Recognition  
Immediately Following

**Space is limited for this  
popular event!**

**To reserve your spot, please complete  
the registration form below and return:**

Email: [golf@la-ahu.org](mailto:golf@la-ahu.org)  
Fax: 504-837-3744  
Mail: LAHU  
P.O. Box 8765  
Metairie, LA 70011

### **GOLD SPONSOR**

**\$1500**

- 4 Player Team– Mulligan Package Included
- Hole Sponsor
- Opportunity to address players & present an award
- Recognition on sponsor banner in Clubhouse
- Recognition during pre-tournament advertising

### **SILVER SPONSOR**

**\$1000**

- 4 Player Team – Mulligan Package Included
- Hole Sponsor
- Recognition on sponsor banner in Clubhouse
- Recognition during pre-tournament advertising

### **BRONZE SPONSOR**

**\$750**

- 4 Player Team
- Hole Sponsor

### **FOOD & BEVERAGE SPONSOR**

**\$650**

- Signage at lunch or on the beverage cart  
(Team Not Included)

### **TEAM OF 4 PLAYERS**

**\$625**

- 4 Player Team

### **HOLE SPONSOR**

**\$350**

- Signage at one hole (Team Not Included)

### **SNACK SPONSOR**

**\$250**

- Signage on the snack cart (Team Not Included)

### **SINGLE PLAYER**

**\$175**

- We will match you with a team

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

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

#### CHOOSE YOUR LEVEL:

- Gold Sponsor \$1500     Silver Sponsor \$1000     Bronze Sponsor \$750     Food & Beverage Sponsor \$650  
 Hole Sponsor \$350     Snack Sponsor \$250     Team of 4 Players \$625     Single Player \$175

Player 1 \_\_\_\_\_ Phone \_\_\_\_\_ Handicap \_\_\_\_\_

Player 2 \_\_\_\_\_ Phone \_\_\_\_\_ Handicap \_\_\_\_\_

Player 3 \_\_\_\_\_ Phone \_\_\_\_\_ Handicap \_\_\_\_\_

Player 4 \_\_\_\_\_ Phone \_\_\_\_\_ Handicap \_\_\_\_\_

PAYMENT:  Check payable to LAHU     Credit Card (Complete Info Below)

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

Expiration Date \_\_\_\_\_ Security Code \_\_\_\_\_ Billing Zip Code \_\_\_\_\_

Signature: \_\_\_\_\_

