

LIBERTY MUTUAL/JASON RAY GOLF TOURNAMENT



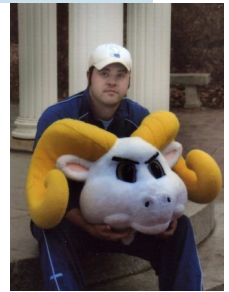
Monday, September 26, 2011

River Run Country Club

19125 River Falls Dr.

Davidson, NC 28036

704-728-1655



10:30 Registration - Lunch Followed by Shotgun Start at 12:00pm

Silent Auction and Reception on Sunday, September 25, 6-9 pm

- | |
|---|
| <input type="checkbox"/> Platinum Sponsorship \$2,250.00 <ul style="list-style-type: none"> • Eight Players, Green Fees, Cart Fees • Signage at Venue • Recognition at the Awards Presentation Banquet • Dinner for 8 Players and 8 Guests • Tee Box / Hole Sponsorship |
|---|

- | |
|--|
| <input type="checkbox"/> Gold Sponsorship \$ 1,250 <ul style="list-style-type: none"> • Four Players, Green Fees, Cart Fees • Signage at Venue • Recognition at the Awards Presentation Banquet • Dinner for 4 Players and 4 Guests |
|--|

- | | |
|---|-------------|
| <input type="checkbox"/> Dinner Sponsors | \$ 4,500.00 |
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| <input type="checkbox"/> Bar Sponsor (Name on Bar) | \$ 2,500.00 |
| <input type="checkbox"/> Lunch Sponsors: | \$ 1,500.00 |
| <input type="checkbox"/> Golf Cart Sponsors (Drinks & Snacks): | \$ 1,000.00 |
| <input type="checkbox"/> Driving Range Sponsor: | \$ 300.00 |
| <input type="checkbox"/> Putting Contest: | \$ 300.00 |
| <input type="checkbox"/> Scoreboard Sponsor: | \$ 300.00 |
| <input type="checkbox"/> Hole-in-One (2 Sponsors): | \$ TBD |
| <input type="checkbox"/> Signage on the Putting Green: | \$ 250.00 |
| <input type="checkbox"/> Tee Box / Hole Sponsorship | \$ 300.00 |
| <input type="checkbox"/> Foursomes with Dinner <i>plus</i> 4 Guests: | \$ 875.00 |
| <input type="checkbox"/> Individual Golfer with Dinner <i>plus</i> Guest: | \$ 225.00 |
| <input type="checkbox"/> Dinner Auction /Reception only : | \$ 45.00 |

All monies raised will go to the UNC Hospital Organ Transplant Center Foundation and is Tax Deductible.

Jason Ray Foundation is a 501(c)(3) Tax ID # is:26-0689815

Jason Kendall Ray Foundation
 PO Box 6326
 Concord, NC 28027
 704-728-1655

For more information, contact the
 Jason Ray Foundation at:
jrayorg@aol.com
 704-728-1655

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Company Name: _____ Contact: _____

Address: _____ Phone: _____

City: _____ State: _____ Zip: _____

Email: _____

Sponsorship: Platinum: _____ Gold: _____ Number of Players: _____

NAME OF PLAYER ONE: _____ Handicap _____

NAME OF PLAYER TWO: _____ Handicap _____

NAME OF PLAYER THREE: _____ Handicap _____

NAME OF PLAYER FOUR: _____ Handicap _____

Each team must consist of four amateur players whose combined USGA Handicap Indexes total 43.0 or more. Only one member of each team may have a USGA Handicap Index of 8.0 or less. Handicaps will be verified for the winning teams.

For Payment in advance we can accept checks to the Jason Kendall Ray Foundation, PO Box 6326, Concord, NC 28027, or you can pay online at www.jasonray.org under give a gift and then please E-mail your entry form to jrayorg@aol.com.

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