



When:

Monday, June 5th 2023

Where:

Neshanic Valley Golf Course
2301 South Branch Road
Neshanic Station, NJ 08853
908-369-8200

Schedule of Activities GOLF

REGISTRATION: From 10:30 a.m.
(Driving Range Available)

LUNCH from 11 a.m.

SHOTGUN START FOR 18 HOLES: 12:30 p.m. – 5:30 p.m.

COCKTAIL RECEPTION

(awards , tricky tray, & 50/50): 5:30 p.m.– 8:00 p.m.

Format: Scramble
Hole-In-One Cars:
Contests and Prizes

\$300 Per Golfer

Please R.S.V.P. online or on the attached form

Somerset Hills Learning Institute Golf Classic



Somerset Hills

LEARNING INSTITUTE

You are cordially invited to the Somerset Hills Learning Institute Golf Classic, an invitational outing benefiting the Somerset Hills Learning Institute, a non-profit school for children and young adults with autism. The proceeds of this year's Golf Classic will be used to defray the operational costs of the Institute.

About the Institute....

Founded in 1998, Somerset Hills Learning Institute is a private non-profit program that offers a broad spectrum of services to children, adolescents, and adults with autism. The Institute exists to provide science-based treatment and education to people with autism. Somerset Hills Learning Institute prepares professionals as future autism intervention resources in New Jersey, and through its research, pioneers comprehensive intervention models that may be used nationally and internationally for the benefit of people with autism.

TREATMENT MENTORING RESEARCH

Sponsorship Opportunities



MASTERS SPONSOR

For a gift of \$15,000

- Speaking opportunity at the Cocktail Reception
 - Opportunity to provide our Cocktail Reception Guests with take-away materials
 - Full day of activities for 4 foursomes
 - Logo recognition on:
 - Carts
 - Pin Flags
 - Hole Signage (6)
 - Putting Signage
 - Practice Area Signage
 - Registration Signage
 - Cocktail Napkins
-

GOLF BAG SPONSOR

For a gift of \$5,000

- Full day of activities for 2 foursomes
 - Opportunity to provide our Cocktail Reception Guests with take-away materials
 - Logo recognition on:
 - Hole Signage (2)
 - Tags placed on EVERY golfer's golf bag
-

US OPEN SPONSOR

For a gift of \$10,000

- Full day of activities for 3 foursomes
- Opportunity to provide our Cocktail Reception Guests with take-away materials
- Logo recognition on:
 - Hole Signage (4)
 - Putting Signage
 - Practice Area Signage

GOLF BALL SPONSOR

For a gift of \$5,000

- Full day of activities for 2 foursomes
- Opportunity to provide our Cocktail Reception Guests with take-away materials
- Logo recognition on:
 - Hole Signage (2)
 - Logo on Golf Balls distributed to all players



Sponsorship Opportunities

BRITISH OPEN SPONSOR

For a gift of \$3,000

Full day of activities for 1 foursome

Logo recognition on:

- Hole Signage (1)
- Putting Signage

BEVERAGE CART SPONSOR

For a gift of \$1,500

Logo recognition on a Beverage Cart

PRACTICE RANGE SPONSOR

For a gift of \$500

Signage on practice range

HOLE SPONSOR

For a gift of \$300

Signage on a hole

DINNER ONLY ATTENDEE - \$125

All checks should be made payable to **Somerset Hills Learning Institute**
and must be received no later than **May 31st 2023**

Contributions may be tax deductible to the extent permitted by law.

Golf Response Form



Neshanic Valley Country Club
2301 South Branch Road
Neshanic Station, NJ

I WOULD LIKE TO PARTICIPATE AS A:

- ☐ MASTER'S SPONSOR (\$15,000)
- ☐ US OPEN SPONSOR (\$10,000)
- ☐ GOLF BAG SPONSOR (\$5,000)
- ☐ GOLF BALL SPONSOR (\$5,000)
- ☐ BRITISH OPEN SPONSOR (\$3,000)
- ☐ BEVERAGE CART SPONSOR (\$1,500)
- ☐ PRACTICE RANGE SPONSOR (\$500)
- ☐ HOLE SPONSOR (\$300)
- ☐ FOURSOME (\$1,200 - \$300 per golfer)

☐ Dinner Only (\$125 per ticket)

PAYMENT INFORMATION:

☐ I am paying by check.

☐ I am Paying via Credit Card.

Cardholder's Name:

Card Number:

Authorized Signature:

Expiration Date: ____/____ CVV: ____

Host Golfer Name	
Company	Golfer #3 Name
Address	Address
Telephone	Telephone
E-mail	E-mail
Handicap	Handicap
Golfer #2 Name	Golfer #4 Name
Address	Address
Telephone	Telephone
E-mail	E-mail
Handicap	Handicap

Sponsor Name: _____

Please complete and return this form with payment to:
Tara Ferrigno, 1810 Burnt Mills Road, Bedminster, New Jersey 07921