



Hoag Charity Shoot

Sponsorship Opportunities
30th Annual Hoag Charity Shoot
Triple B Clays Shotgun Sports Park
Friday, April 29, 2011

Beginners Clinic Sponsor **\$1,500**

- Recognition in the event program
- Website recognition
- Signage at the Beginners Clinic shooting station, reception area and event entry
- 1 shooter's spot

Beverage Sponsor **\$2,000**

- Recognition in the event program
- Website Recognition
- Recognition at all beverage stations, reception area and event entry
- 1 shooter's spot

Lunch and/or Dinner Sponsor **\$2,500**

- Recognition in the event program and 1/4 ad
- Recognition in Daily Pilot, Los Angeles Times coastal communities newspaper (approximately 22,000 subscribers)
- Recognition in "Scanner" Hoag Hospital Foundation's quarterly magazine mailed to 10,000 subscribers
- Website Recognition
- Tent cards on all dining tables, reception and event entry
- 1 shooter's spot

Awards Sponsor **\$3,000**

- *Lunch/Dinner Sponsor Benefits PLUS . . .*
- Recognition during awards ceremony
- Your company logo on award gift wrap

Golf Cart Sponsor **\$3,500**

- *Lunch/Dinner Sponsor Benefits PLUS . . .*
- Signage on all VIP golf carts and staff golf carts

Station Sponsor **\$5,000**

- *Lunch/Dinner Sponsor Benefits PLUS . . .*
- Signage at course shooting stations

Wounded Warrior Team Sponsor **\$5,000**

- *Lunch/Dinner Sponsor Benefits PLUS . . .*
- Enable a team of 5 military war veterans to participate in shoot.

Benefiting Hoag Hospital



Hoag Charity Shoot

VIP Team Registration Form

- \$ 5,000 VIP Teams
- \$ 400 x _____ = _____ Individual shooters (General Admission)
- I cannot participate, but here is my donation for Hoag Hospital
- I would like to sponsor a Wounded Warrior at: \$50 \$100 \$250 \$400

Team Members

Email Address

Event Sponsorship Opportunities *I would like to be a:*

- | | |
|--|---|
| <input type="checkbox"/> Station Sponsor at \$5,000 | <input type="checkbox"/> Golf Cart Sponsor at \$3,500 |
| <input type="checkbox"/> Lunch Sponsor at \$2,500 | <input type="checkbox"/> Dinner Sponsor at \$2,500 |
| <input type="checkbox"/> Wounded Warrior Team Sponsor at \$5,000 | <input type="checkbox"/> Awards Sponsor at \$3,000 |
| <input type="checkbox"/> Beginner Clinic Sponsor at \$1,500 | <input type="checkbox"/> Beverage Sponsor at \$2,000 |

TOTAL COMMITMENT \$
= _____

Attached is my check made payable to HOAG HOSPITAL FOUNDATION.
Goods and services are valued at \$200 per person for the Shoot; the balance qualifies as a charitable contribution.

Please charge my credit card \$ _____ MasterCard VISA AMEX Discover

Name on the card: _____

Account Number: _____ Exp. Date: _____

Security Code: _____ Billing zip code: _____