

## Major Sponsors

Ameriwood Home  
 Aqua Ohio Water, Inc.  
 Bolte Real Estate  
 Carmie's Catering  
 CompManagement  
 CompManagement Health Systems  
 Coppus Motors  
 Corporate One Benefits  
 Laminate Technologies, Inc.  
 Mercy Health - Tiffin Hospital  
 MLAD Graphic Design Services  
 Old Fort Banking Company  
 Reineke Family Dealerships  
 Sarka  
 State Bank  
 Sutton Bank  
 Tiffin University  
 Toledo Molding & Die  
 UIS Insurance & Investments  
 Webster Industries  
*May I please add your name?*

Thursday, June 8, 2017

## Schedule of Events for the Chamber Challenge

Registration 8:30 - 10 a.m.  
 Shot Gun Start 10 a.m.  
 Lunch at the Turn 11 a.m. - 1 p.m.  
 Cocktails (on your own),  
 Hors d'oeuvres, Awards  
 3 p.m.

**Mohawk Golf & Country Club**

Entry includes:

Greens Fee  
 Cart  
 Lunch  
 On-course Beverages  
 Prizes



### REGISTRATION/SPONSORSHIP FORM *Please fill out and return to the Chamber*

#### Sponsorship Levels

Please check all that apply:

- Major Sponsor: \$1,000**  
 (includes team of four golfers, hole sponsor, full advertising, promotion and recognition package)
- Premier Sponsor: \$700**  
 (includes team of four golfers, hole sponsor)
- Team: \$600** (includes team of four golfers)
- Event Sponsor: \$500** (includes hole sponsor, advertising, promotion and recognition package)
- Individual Golfer: \$150** (includes greens fees, cart, lunch, and on-course beverages)
- Hole Sponsor: \$150**
- Patron Sponsor: \$100**

**We are also seeking donations for Door Prizes as well as Goody Bag items.**

We will donate the following items:

- Door Prize
- Goody Bag Item

Check    Cash    Credit Card

#### Payment Information:

Amount Paid: \$ \_\_\_\_\_  
 Card No: \_\_\_\_\_  
 Card Type: \_\_\_\_\_  
 Exp. Date: \_\_\_\_\_ Code: \_\_\_\_\_

#### Team Players:

1. (Captain) \_\_\_\_\_  
 E-mail: \_\_\_\_\_  
 Phone: \_\_\_\_\_
2. \_\_\_\_\_  
 E-mail: \_\_\_\_\_  
 Phone: \_\_\_\_\_
3. \_\_\_\_\_  
 E-mail: \_\_\_\_\_  
 Phone: \_\_\_\_\_
4. \_\_\_\_\_  
 E-mail: \_\_\_\_\_  
 Phone: \_\_\_\_\_

#### Business Information:

Company Name: \_\_\_\_\_  
 Contact Name: \_\_\_\_\_  
 Contact E-mail: \_\_\_\_\_  
 Contact Phone: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 City/State/Zip: \_\_\_\_\_

Please make checks payable to **Seneca Regional Chamber of Commerce** and mail to  
 19 West Market Street, Ste. C,  
 Tiffin, OH 44883.  
 419-447-4141      info@tiffinchamber.com