



DIAMOND
ATHLETIC MEDICAL SUPPLIES INC.

11th Annual

DIAMOND IN THE ROUGH

nine-hole golf event



Tuesday,
May 30, 2023

Glendale Golf &
Country Club

In support of:

panam
CLINIC | Foundation

RESERVE TODAY:

Aimee at 204-232-8271
or arice@panamclinic.com

Presented by:



Sponsorship Opportunities

Presenting Sponsor - SOLD

Cart Sponsor - SOLD

Lunch Sponsor - SOLD

Dinner Sponsor - \$5,000

Auction Sponsor - \$5,000

Putting Sponsor - \$3,500

Refreshment Cart Sponsor - \$3,500

- One team of four golfers
- Acknowledgement on all print materials
- First right of refusal for 2024 golf event
- Opportunity to provide promotional gift to all golfers
- Corporate name acknowledgement in Pan Am Clinic Foundation annual report

Hole Sponsor with four golfers - \$2,750

- One team of four golfers
- Logo recognition on signage at your sponsored hole
- Opportunity to do an activity or product sampling at your sponsored hole
- Corporate name acknowledgement in Pan Am Clinic Foundation annual report

Hole Sponsor (no golfers) - \$1,500

- Logo recognition on signage at your sponsored hole
- Opportunity to do an activity or product sampling at your sponsored hole
- Corporate name acknowledgement in Pan Am Clinic Foundation annual report

Individual Team (four golfers) - \$1,700

Individual Golfer (up to 20 available) - \$425

Prize Sponsors - \$250 - monetary or team prize donations are needed in sets of four. Larger ticket items for on-course contests and auction.

Thank you for supporting the Pan Am Clinic Foundation! Your participation in the 11th Annual Diamond in the Rough golf event will directly support the groundbreaking research, outreach programs, and educational activities of Pan Am Clinic.

In addition to the benefits listed, sponsorship includes recognition in the event program and verbal recognition at the event.

All registrations include green fees, shared golf cart, BBQ lunch and dinner

Presented by:



Sponsorship & Registration Form

Please complete for all golfers

1 _____
Name of Golfer #1

Company Name

Address

Phone Number

Email

2 _____
Name of Golfer #2

Company Name

Address

Phone Number

Email

3 _____
Name of Golfer #3

Company Name

Address

Phone Number

Email

4 _____
Name of Golfer #4

Company Name

Address

Phone Number

Email

Payment Information:

Sponsor Category Amount: \$ _____

Cheque Mastercard Visa Amex

Cardholder Name: _____

Cardholder Billing Address: _____

Credit Card # _____ Expiry Date: _____ CVC: _____

***Please make cheque payable to Pan Am Clinic Foundation**

75 Poseidon Bay, Winnipeg, MB, R3M 3E4, Attention: Aimee Rice (arice@panamclinic.com | 204-232-8271)

Charitable Reg. #89595 3032 RR0001