

**TOURNOI
DES MAÎTRES
DE ST. MARY**

Venez pour le jeu.
Jouez pour la cause.



**ST. MARY'S
MASTERS**

Come for the game.
Play for the cause.

ST. MARY'S MASTERS
MONDAY, JUNE 10th, 2024
ROYAL MONTREAL GOLF CLUB



FONDATION DE
L'HÔPITAL
ST. MARY

ST. MARY'S
HOSPITAL
FOUNDATION



FOURSOME OPPORTUNITIES

LEGACY FOURSOME \$30,000

- **Personalized plaque** displayed in perpetuity in the **St. Mary's Command Centre**
- **Loge experience for four (4) guests** at a **Montreal Canadiens** hockey game during the 2024-2025 regular season (random selection)
- **Priority course placement**
- Corporate recognition on a **pin flag**
- Corporate recognition on the **tee marker**
- Corporate recognition in the **program**
- Corporate recognition on **social media**
- Corporate recognition on the **website event page**
- Brunch, Cocktail & Dinner

Please register me for the
LEGACY FOURSOME

PLATINUM FOURSOME \$10,000

- **Round of golf for four (4)** at a prestigious Montreal area golf course (random selection)
- **Priority course placement**
- Corporate recognition on a **pin flag**
- Corporate recognition in the **program**
- Corporate recognition on the **website event page**
- Brunch, Cocktail & Dinner

Please register me for the
PLATINUM FOURSOME

GOLD FOURSOME \$7,500

- Corporate recognition on a **tee marker**
- Corporate recognition in the **program**
- Corporate recognition on the **website event page**
- Brunch, Cocktail & Dinner

Please register me for the
GOLD FOURSOME

MASTERS FOURSOME \$5,000

- Corporate recognition on the **website event page**
- Brunch, Cocktail & Dinner

Please register me for the
MASTERS FOURSOME

EARLY BIRD RECOGNITION

REGISTRATION & PAYMENTS received by **April 19th**
secures your free Tee Marker sponsorship!

TOURNAMENT MASTER \$50,000

Exclusive Title Sponsor of the event includes:

- Two (2) St. Mary's Masters 2024 tournament foursomes
- Two (2) tickets for one (1) day during the 2024 Presidents Cup Golf Tournament
- Presidents Cup exclusive duffle bag
- Priority course placement
- Feather flag
- Pin flag
- Tee marker
- Brunch, Cocktail & Dinner

With corporate representation on:

- Program
- Podium
- Posters
- Website
- Social media



CART MASTER \$6,000

- Corporate recognition on all **golf carts**
- Corporate recognition in the **program**
- Corporate recognition on the St. Mary's Masters **event page**

I would like exclusive sponsorship
as the Cart Master

REGISTRATION MASTER \$6,000

- Corporate recognition in the **registration area**
- Corporate recognition in the **program**
- Corporate recognition on the St. Mary's Masters **event page**

I would like exclusive sponsorship
as the Registration Master

BRUNCH MASTER \$6,000

- Corporate recognition displayed during the **brunch**
- Corporate recognition in the **program**
- Corporate recognition on the St. Mary's Masters **event page**

I would like exclusive sponsorship
as the Brunch Master

MINGLE MASTER \$6,000

- Corporate recognition displayed during **cocktail/dinner**
- Corporate recognition in the **program**
- Corporate recognition on the St. Mary's Masters **event page**

I would like exclusive sponsorship
as the Mingle Master

RANGE & PUTTING GREEN MASTER \$6,000

- Corporate recognition at the **driving range & putting green**
- Corporate recognition in the **program**
- Corporate recognition on the St. Mary's Masters **event page**

I would like exclusive sponsorship
as the Range & Putting Green Master

19th HOLE MASTER \$6,000

- Corporate recognition at the **19th Hole**
- Corporate recognition in the **program**
- Corporate recognition on the St. Mary's Masters **event page**

I would like exclusive sponsorship
as the 19th Hole Master

TEE MARKER \$500

Corporate representation displayed on one (1) tee marker.

Please register me for tee marker(s).

DONATION OPPORTUNITY

In lieu of participating in the tournament, I would like to support St. Mary's by making a donation of \$

Note: For publishing deadlines, we respectfully request your corporate logo before **May 17th, 2024**.

E-mail Kristine Hebert at kris.hebert.comtl@ssss.gouv.qc.ca / Visit our website for online registration at www.stmaryshospitalfoundation.ca/masters

Name _____ Company _____

Address _____ Telephone _____

City _____ Postal Code _____ Email _____

Please list the name as you would like it to appear in all recognition

METHOD OF PAYMENT

Cheque (payable to **St. Mary's Hospital Foundation**)

Visa MasterCard American Express

Card Number _____

Expiry Date _____ CVC/CVV _____

Signature _____