

Player #4: Name

## The CIBPA Espresso Cup Golf Tournament



## REGISTRATION FORM

To secure your sponsorship opportunity, please complete this spons	sorship commitment form and submit to Diana
Panacci by fax to(416) 782-5500 or email to toronto@cibpa.com . S	Sponsorships will not be confirmed until this form and
payment are received.	
Sponsorship Opportunity:  † Title Sponsor	Investment: \$7,500.00
	\$ 5,000.00
† Cart Sponsor	
† Golf Glove Sponsor	\$ 5,000.00
† Pin Flag Sponsor	\$ 4,000.00
† Beverage Cart Sponsor	\$ 3,500.00
† Wine Sponsor	\$ 3,000.00
† Cocktail/Awards Reception Sponsor	\$ 3,000.00
† BBQ Lunch Sponsor	\$ 3,000.00
† Golfers Gift Bag Sponsor	\$ 3,000.00
† Golf Ball Sponsor	\$ 2,000.00
+ Soppressata Sponsor	\$ 750.00
† Hole Sponsor Only	\$ 350.00
† Foursome (includes: lunch, golf and Cocktail/Awards Recept † Individual Player Fee (includes lunch, golf and Cocktail/Awards Reception only people attending  (All prices include applicable taxes)  Contact Information Company Name:  Email Address:  Method of Pay † Visa † MasterCard † American Express † Cheque	vards Reception) \$ 300.00 x  # of guest \$ 100.00 x  # of guest  Total:  Contact Person:  Phone Number:
Credit Card Number:	Exp. Date: CV:
Name on Card:	Signature:
Please email your high-resolution corporate logo in .eps, .png or .jpg format to Diana Panacci at toronto@cibpa.com  Will you have a promotional display requiring a table & chairs? † Yes † No If yes, # of chairs required:  All other requirements are the responsibility of the sponsor.  TOURNAMENT PLAYER INFORMATION	
Player #1: Name Ema	nail:
	mail:
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