



22nd Annual Ribbon of Hope Golf Challenge Registration/Sponsorship Form

Northbrook Golf & Grill, Luxemburg, WI – Monday, June 24, 2024

____ Yes, reserve a foursome for golf and dinner at \$700

Complete the golfer section on the backside. Registration is limited.

____ Yes, I would like to be a sponsor for the golf outing. *See enclosed sheet.*

____ Flying Pig (\$7,500)

____ Ribbon of Hope (\$5,000)

____ Ribbon (\$2,500)

____ Dinner (\$2,000)

____ Hope (\$1,000)

____ Golf Cart (\$1,000)

____ Lunch (\$1,000)

____ Support (\$750)

____ Survivor Gift (\$750)

____ Courage (\$500)

____ Tee (\$500)

____ Vodka Splash (\$500)

____ Beer Hole (\$500)

____ Truck (\$500)

____ Ice Cream Hole (\$500)

____ Individual (\$200 and over)

____ Other cash donations, auction or raffle items

____ Yes, I would like purchase a \$25 breast cancer dedication or memorial flag

In honor of _____

In memory of _____

____ Yes, reserve _____ for the dinner/auction only at \$50.00 per person

Complete the dinner only portion on the backside of this form

_____ Total amount enclosed

Name _____ Phone _____

Business Name (if applicable) _____

Address _____

City/State/Zip _____

Email _____

Make check payable to: *Ribbon of Hope Foundation*

Return check and registration/sponsorship form to:

Carmine Nell, 1219 Colle Street, Luxemburg WI 54217

Contact Info: (920) 609-5737 carminenell@ribbonofhope.com

Thank you very much for helping us raise money for local individuals with breast cancer!



22nd Annual Ribbon of Hope Golf Challenge Registration/Sponsorship Form
Monday, June 24, 2024 – 10:30 a.m. Shotgun Start – Northbrook Golf & Grill

Golfers: Complete this section (\$700 a foursome.....includes golf, lunch and dinner) *Registration is limited.*

Team Name _____

1. Captain's Name _____

Address _____

Phone _____ Email _____

Other team members (can be added/changed later):

2. Name _____

Address _____

Phone _____ Email _____

3. Name _____

Address _____

Phone _____ Email _____

4. Name _____

Address _____

Phone _____ Email _____

Please complete this section for dinner tickets only (\$50 each)

Silent Auction starts at 4:30 p.m.; Dinner at 5:45 p.m.

Let us know if you have a specific dietary requirement.

1. Name _____ Phone _____

Address _____

2. Name _____ Phone _____

Address _____

3. Name _____ Phone _____

Address _____

4. Name _____ Phone _____

Address _____