

21st Annual PFHTA Benefit Golf Tournament August 14th 2018 - Sevierville Golf Club



PIGEON FORGE
HOSPITALITY AND TOURISM
ASSOCIATION



Presented by S&D Coffee & Tea

Sponsorship/Team Commitment Form

For your convenience, you can visit www.PFHospitality.org for more information.

Please complete the following information:

Company Name: _____

(as you wish it to appear in published materials)

Address: _____

Contact Person: _____

Phone: _____ Fax: _____ Email: _____

Web site address (URL): _____

Sponsorship & Team Opportunities:

__ Bronze Sponsor (\$2,500)

__ Foursome Photo (\$1,500)

__ Closest to Pin (\$1,250)

__ PFHTA Partner Package (\$1,000)

__ Score Card Sponsor (\$1,250)

__ Golf Foursome Team (\$600)

__ Exclusive Hole Sponsor (\$500)

__ Driving Range Sponsor (\$500)

__ Putting Contest Sponsor (\$500)

Thank you very much for your consideration/support of the 21st Annual PFHTA Benefit Golf Tournament.

***** Proceeds benefit Mountain Hope Clinic; Boys & Girls Club of the Smoky Mountains; and PFHS Scholarship**



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We are also accepting **"in-kind" donations** of gift certificates, attraction/event tickets, product donations and other raffle and silent auction items.

I plan to donate (list item): _____

Please contact me regarding an in-kind donation: _____

(phone number: _____ and email address: _____)

Silent Auction Coordinators: Melanie Clifford: melanie.clifford@marriott.com or Kyle Grainger: kyle.grainger@wvlt-tv.com

Volunteers are always appreciated for this fundraiser, if you would like to serve, please indicate below and a member of the Golf Committee will contact you.

I would like to donate my time as a volunteer

(phone number: _____ and email address: _____)

Volunteer Coordinators: Barbie Perillo: groupsalestiotr@gmail.com or Stephanie Bean: stephanie.bean@smartbank.com

Should you need an invoice, please contact our coordinator, Christie Balog or complete the information below:

Method of Payment:

Payment Enclosed Check #: _____ Amount: \$ _____

(Please make check payable to PFHA, Inc.) -OR-

Please charge my American Express; MasterCard; Visa; Discover (circle one)

Amount to be charged: \$ _____ Name: _____

(As it appears on card)

Account Number: _____ Expiration Date: _____

Signature/Authorization: _____

*****INDICATE PREFERRED TEE TIME if applicable: _____ 7:00 am or _____ 1:00 pm**

Please mail or email completed form to: PFHTA, P.O. Box 1401, Pigeon Forge, TN 37868 or email to christieb@pfhospitality.org (865) 280.1824

For more information, please contact:

Committee Chairman: Tom Headla: (865) 453-3717 – tombmr@aol.com

Committee Co-Chair: Ray Ogle: (865) 868-0521 ray@innatchristmasplace.com

Committee Co-Chair: Eric Bradley: (865) 908-7071 - eb@freetouristguide.com

