



Sponsorship Commitment

Topeka Performing Arts Center

Sponsor Information

Company Name: _____

Contact Name: _____

Address: _____ City/State/Zip: _____

Phone: _____ Email: _____

Sponsorship Commitment

Title Sponsor \$4,000 Cart Sponsor \$2,500 Gold Sponsor \$2,000

Silver Sponsor \$1,500 Closest to the Pin / Longest Drive Sponsor \$500

Hole Sponsor \$150 Beverage Sponsor \$1,000

Lunch Sponsor

Hole in One SPONSOR (Large Prize Insurance) Other _____

Payment Information

Credit Card Amount: _____ Card Billing Zip Code _____

Card Number: _____ Exp: _____ CVV Code: _____

Check Enclosed/Will be mailed: _____

Please Remit Payment to: Topeka Performing Arts Center 214 SE 8th Avenue, Topeka, KS 66603

Please Send an Invoice

Invoice Address if different then above: _____

Signature: _____ Date: _____