

Entry Fees & Sponsorship Opportunities

Sign up online at bit.ly/cca-golf, or check all that apply and fill out the other side to sign up by mail.

Underwriter \$10,000+

- Entry fees for up to four teams of four golfers
- Banner and signage at clubhouse and on course
- Ad in tournament program, name/logo on all printed materials, access to goody bags

Champion Sponsor \$5,000

- Entry fees for up to three teams of four golfers
- Banner and signage at clubhouse, signs on beverage cart and a tee
- Ad in tournament program, access to goody bags

Eagle Sponsor \$2,500

- Entry fees for up to two teams of four golfers
- Signage at clubhouse, beverage carts and a tee
- Ad in tournament program, access to goody bags

Birdie Sponsor \$1,000

- Entry fee for one team of four golfers
- Signage at clubhouse and a tee, name in program

Hole Sponsor \$500

- Signage at a tee, name in tournament program

Four-Person Golf Tournament Team \$700

- Entry fee for one team of four golfers

Individual Player Golf Tournament Entry \$175

- Individual entry fee

Sponsor a priest's or religious' entry \$175

- Name (optional) _____

Donation to Catholic Charities \$ _____

Total amount enclosed \$ _____

Your support of

Catholic Charities of Arkansas

makes an important difference to Arkansans in need. A gift of:

- \$250 can provide dental care for a patient at Westside Free Medical Clinic.
- \$600 can give emergency help with a utility bill for four families through our family assistance program.
- \$1,000 can cover the cost of work permit applications for two eligible immigrants.
- \$2,000 can cover the legal fees for adoption of a baby through Catholic Adoption Services.
- \$3,000 can provide a year of Bibles and rosaries for people incarcerated in the criminal justice system.

Catholic Charities' mission is rooted in the challenge of the Gospel:

- To serve persons who are poor or on the margins of society
- To advocate on behalf of the most vulnerable
- To promote charity, justice and the sanctity of life in the Church and the community.

Catholic Charities of Arkansas
Diocese of Little Rock
2500 N. Tyler St.
P.O. Box 7239
Little Rock AR 72217-7239
Phone: (501) 664-0340 ext. 379
Fax: (501) 664-9186
www.dolr.org



26th Annual Bishop McDonald Memorial Golf Classic Monday, October 18, 2021

Diamante Country Club, Hot Springs Village
to benefit Catholic Charities of Arkansas

NEW: You can sign up online with your credit or debit card at bit.ly/cca-golf.

26th Annual Bishop McDonald Memorial Golf Classic

Monday, October 18, 2021 • Diamante Country Club

Four-Person Scramble
8 a.m. or 1:30 p.m. Shotgun Start
Continental breakfast & lunch provided
Complimentary beverages
Awards following morning & afternoon play

- TEAM PRIZES
- CLOSEST TO PIN
- HOLE IN ONE
- LONGEST DRIVE

For more information, contact Megan Moore, (501) 664-0340, ext. 379

Golf Player Registration

Teams may register online with a credit or debit card at bit.ly/ccg-golf. To enter by mail, fill out this form. Copy as needed to enter more teams. Complete other side to calculate entry fee(s) and form at right to send payment.

Preferred Tee Time (check one)

- 8 a.m.
 1:30 p.m.

Player One / Team Captain

Please provide complete contact information.

*Name _____
*Email: _____
*Phone (____) _____
*Address _____
*City, State, ZIP _____

Player Two

*Name _____
*Email: _____
Phone (____) _____
Address _____
City, State, ZIP _____

Player Three

*Name _____
*Email: _____
Phone (____) _____
Address _____
City, State, ZIP _____

Player Four

*Name _____
*Email: _____
Phone (____) _____
Address _____
City, State, ZIP _____

*Starred items show the minimum info needed about each player.

YES! We want to sponsor the Bishop McDonald – Catholic Charities Golf Classic!

We want to sign up by mail, so here's our info.
Our sponsorship level is marked on the other side.

Sponsor Information (Please print clearly)

Business Name (if applicable) _____

Contact Person _____

Email Address _____

(____) _____
Telephone _____

Address _____

City, State, Zip _____

- Company logo is Attached
 To be sent later
 Use last year's logo

Authorized Signature _____

- Method of Payment:
 Check (Payable to Catholic Charities of Ark.) Visa
 Mastercard

Credit Card Number _____ Exp. Date _____

Print name on card _____

Signature _____

Mail to: Catholic Charities of Arkansas,
P.O. Box 7239, Little Rock AR 72217-7239