



Association of St. Augustine Alumni – New Orleans

SPONSORSHIP COMMITMENT FORM

► **Company Name:** _____ **Date:** _____

Contact Name: _____

Address: _____

City: _____ **State:** _____ **Zip:** _____

1st Phone#: _____ **2nd Phone#:** _____

Email: _____

► I would like to sponsor the 7th Annual Golf Classic at the level selected below:

Classic Sponsor (\$3,000)

Knight Sponsor (\$2,000)

Gold Sponsor (\$1,500)

Hole Sponsor (\$200)

Payment Methods: Cash, Personal Checks, Cashier's Checks, and Money Orders
(Payable to: Association of St. Augustine Alumni – New Orleans, Inc.)

► **Sponsor's Signature:** _____ **Date:** _____

Print Name: _____

Solicitor's Signature: _____ **Date:** _____

Print Name: _____

Chairman's Signature: _____ **Date:** _____

Print Name: _____