



NAPA COUNTY FARM BUREAU
AGRICULTURE IN
THE CLASSROOM



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9th Annual Meadow Muffin
Ag Education Golf Classic

May 11, 2012
Eagle Vines Golf Club

Eagle Vines Golf Club is located on S. Kelly Road
off Hwy 12 and Hwy 29 between Napa and Fairfield.

7:30am Registration & Continental Breakfast
8:45am Shot-Gun start
Lunch & Awards to follow

Major Sponsorships
Includes Signage at Event Registration Table

Eagle Sponsor \$3500
Green fees for four
Your company name/logo in program
Corporate banner display
Emcee recognition
Half page advertisement in Grower Advocate for 1 year
NCFB Business Membership

Birdie Sponsor \$2500
Green fees for four
Your company name/logo in program
Corporate banner display

Par Sponsor \$1500
Green fees for two
Your company name/logo in program
Additional player spots at \$145

Putting Contest Sponsor \$1000
Green fees for two
Your company name/logo at putting green
Additional players at \$145

Cart Sponsor \$750
Your company name and logo displayed on all golf carts
Your company name/logo in program
Additional players at \$145

Additional Sponsorships

Lunch Sponsor \$500
Prominent display of your company name/logo at awards
luncheon and special placement in program.

Course Beverage Sponsor \$250
Prominent display of your company name/logo on golf course
and special placement in program.

Tee Box Sponsor \$175
Prominent display of your company name/logo at tee box.

Player Spot \$165

Sign-up Today!

- Eagle Sponsor \$3500
 - Birdie Sponsor \$2500
 - Par Sponsor \$1000
 - Putting Contest Sponsor ~~\$1000~~ SOLD
 - Cart Sponsor \$750
 - Lunch Sponsor \$500
 - Course Beverage Sponsor \$250
 - Tee Box Sponsor \$175
 - Player Spot \$165/player
 - Additional Lunch (non players) \$40
 - Additional Sponsorship
- Total _____

My company would like to donate the following promotional items for awards, raffle or tee prizes (i.e. golf balls, golf bags, wine, packaged nuts, tools, etc.)

Sponsor Name _____
Contact Name _____
Address _____
City _____ St. _____ Zip _____
Phone (____) _____ - _____ Fax (____) _____ - _____
E-mail _____
Golfer # 1 _____ Handicap _____
Golfer # 2 _____ Handicap _____
Golfer # 3 _____ Handicap _____
Golfer # 4 _____ Handicap _____
 please bill my credit card check to AITC is enclosed
Credit card # _____ Exp. ____ / ____
Billing zip code _____ CVV# _____
Signature _____ Date ____ / ____ / ____