



# 2020 MCA Memorial Scholarship Golf Outing Registration

Outing Date: August 12, 2020 - Eagle Eye Golf Course, Bath, Michigan



## Registration Deadline: July 29, 2020

### Team Captain Information:

Company \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Email \_\_\_\_\_ Phone \_\_\_\_\_ Fax \_\_\_\_\_

## Golfer Information



Registration fee includes: continental breakfast, lunch, green fees, balls for practice range, cart, golf prizes, door prizes and dinner with open bar



Captain \_\_\_\_\_ Company \_\_\_\_\_ Email \_\_\_\_\_

Player #2 \_\_\_\_\_ Company \_\_\_\_\_ Email \_\_\_\_\_

Player #3 \_\_\_\_\_ Company \_\_\_\_\_ Email \_\_\_\_\_

Player #4 \_\_\_\_\_ Company \_\_\_\_\_ Email \_\_\_\_\_

(Note: Don't have a team? We will be happy to place you on a team looking for an additional player.)

**Fees: Golf & Dinner - \$185.00 per Golfer, Dinner Only \$75.00**

**A confirmation letter with map and directions will be emailed to all golfers approximately one week prior to the outing.**



**Total Amount Due: \$ \_\_\_\_\_**



### PAYMENT

We accept check or credit card payment  
(Visa, MasterCard, Discover & American Express)

**Please make checks payable to:**  
***MCA SCHOLARSHIP FUND***

Fax registration form with credit card payment to:  
517.347.7740 or email: [cruthig@miconcrete.net](mailto:cruthig@miconcrete.net)

Mail registration with check to:  
Michigan Concrete Association  
2937 Atrium Drive, Suite 200, Okemos, MI 48864  
Questions - Call: 800.678.9622

Card # \_\_\_\_\_

Expiration: \_\_\_\_\_

Name on Card \_\_\_\_\_

Signature \_\_\_\_\_

Email for Receipt \_\_\_\_\_

Billing Address for Card \_\_\_\_\_

\_\_\_\_\_



# 2020 MCA Memorial Scholarship Golf Outing Sponsorship Opportunities

Golf Outing Date: August 12, 2020—Eagle Eye Golf Course

**Sponsor Deadlines: Hole Sponsorship by July 17, 2020**

**All Other Sponsorships by July 29, 2020**



Below is a list of sponsorship opportunities that are available for this year's golf outing. If you are interested in sponsoring one of these items, please fax this completed form back to the MCA office by the dates listed above at (517) 347-7740. Items are available on a first-come, first-served basis. Your company name will also appear on the sponsorship list displayed on the tables during the awards dinner and in our upcoming newsletter. You may provide both co-sponsor names or pair with someone else that contacts MCA directly wherever a co-sponsorship is available. Please email company logos and/or forms to Corrina at [cruthig@miconcrete.net](mailto:cruthig@miconcrete.net).

**Hole Sponsorships (Return by July 17th to ensure we have a sign for you. Thank you.)**  
Unlimited opportunities are available. Sponsor receives a sign at hole.  \$200.00 Sponsor

Sponsor Name: \_\_\_\_\_

**Score Card Sponsor (one sponsor)**  
Scorecards will have your company logo printed on them.  \$350.00 Sponsor

Sponsor Name \_\_\_\_\_

**Beverage Cart Sponsor (2 Carts available—four sponsors per cart)**  
Signs will be displayed with your company logo.  \$500.00 Sponsor

Sponsor Name: \_\_\_\_\_

**Continental Breakfast (unlimited)**  
A sign will be displayed with your company logo.  \$350.00 Sponsor

Sponsor Name: \_\_\_\_\_

**Lunch or**  **Dinner (unlimited)**  
Signs will be displayed with your company logo.  \$350.00 Sponsor

Sponsor Name: \_\_\_\_\_

**I will make a donation to the "Memorial Scholarship Fund".**  
Your name will appear on the sponsorship list displayed at the awards dinner. \$ \_\_\_\_\_

Sponsor Name: \_\_\_\_\_

### PAYMENT

We accept check or credit card payment  
(Visa, MasterCard, Discover & American Express)

Please make checks payable to:  
**MCA SCHOLARSHIP FUND**

**Fax registration form with credit card  
payment to: (517) 347-7740**

**Mail registration with check to:  
Michigan Concrete Association  
2937 Atrium Drive, Suite 200, Okemos, MI 48864  
Questions - Call: (800) 678-9622**

Card # \_\_\_\_\_

Expiration: \_\_\_\_\_

Name/Card \_\_\_\_\_

Signature \_\_\_\_\_

Email for Receipt \_\_\_\_\_

Billing Address for Card \_\_\_\_\_

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