



Solomon and Kevin Acrish Memorial Golf Tournament

Benefiting Temple Beth Elohim
Wednesday, September 4, 2019

You are invited to sponsor and participate in the Solomon and Kevin Acrish Memorial Golf Classic 2019. We are privileged to have the use of the fabled, prestigious Morefar Golf Course in Brewster. Don't miss this once in a lifetime opportunity to enjoy one of the most exclusive and immaculately maintained 18-hole championship golf courses in the country.

Sponsorship Packages

\$5,000 Gold Sponsorship (only one available)

Includes:

- One golfing foursome
- Sponsor a hole – signage on tee box
- ½ page ad in the Temple's monthly publication (Menorah)
- Name & logo imprinted on giveaways to be distributed at the event

\$3,250 Silver Sponsor

Includes:

- One golfing foursome
- Sponsor a hole – signage on tee box
- ¼ page ad in the Temple's monthly publication (Menorah)

\$550 Individual Golfer (spot not guaranteed)

Includes:

- Individual Golf

\$250 Hole Sponsor

Includes:

- Sponsor a hole – signage on tee box



Playing spots for this event are extremely limited – first come, first serve. We are actively selling foursomes and individual sponsors; because of high demand, we may not be able to accommodate individual golfers.

Schedule:

Registration & Buffet Breakfast: 8:00 am to 10:00 am

Shotgun Start: 10:00 am

Early Dinner & Awards: 3:00 pm

Morefar Back O' Beyond
Golf Course
233 Federal Hill Road
Brewster, NY

If you should have any questions, please contact Temple Beth Elohim at
845-279-4585 Ext 1 or email templebethelohim@comcast.net.

Please make checks payable to

"Temple Beth Elohim"
and mail to [31 Mt Ebo Road North, Brewster, NY 10509.](#)

Support Options

Gold Sponsor \$5,000: _____ Individual Golfer \$550: _____
Silver Sponsor \$3,250: _____ Hole Sponsor \$250: _____

Registration Form The Solomon and Kevin Acrish Memorial Golf Tournament 2019

This form must be completed and returned with check payable or credit card information to:
Temple Beth Elohim 31 Mt Ebo Road North, Brewster, NY 10509.
If payment is not received, your spot cannot be guaranteed.

Name/First _____ Last _____

Address _____

Phone: () _____ E-Mail: _____

List Your Foursome:

1: _____ 2: _____
3: _____ 4: _____

Payment Must Be Received to Guarantee Your Entry. First Come First Served

Credit Card Information:

Name of Account Holder: _____

Address of Acct Holder: _____

City _____ State _____ Zip Code _____

Telephone Number: () _____

Please check one: Master Card ___ Visa Card ___ (Sorry We do not take Amex)

Card # _____ Security code _____ Exp Date ___/___

Billing Address: _____

City _____ State _____ Zip Code _____

I hereby authorize a charge of \$ _____ to my credit card account

Signature: _____ Date: ___/___/___