

Archmere Academy's 21st Annual Alumni Golf Outing Reservation Form

When: **Thursday, September 18, 2008.** Shotgun start at 11:30am (registration at 10am)

Where: **Delaware National Country Club, 400 Hercules Road, Wilmington, DE**

A. Yes, please sign me up for Scramble Play at \$175 per person.

Below are the names of my foursome (if applicable).

Name	Check if paying for together
_____	_____
_____	_____
_____	_____
_____	_____

B. Yes, please sign me up for the following Archmere sponsorship opportunity (see benefits below):

_____ **Tee-sign Sponsor:** \$150, display of your company logo on course tee signs

_____ **Photo Sponsor:** \$1,500, your company logo on each golfer's custom photo mouse pad which includes
(NEW) each golfer's 4 progressive swing photos and foursome photo (make a daily impression)

_____ **Dinner Sponsor:** \$2,500, complimentary four-some registration (a \$700 value),
prominent display of your company banner at dinner, tee-sign on course,
& opportunity to distribute marketing materials

_____ **Bar Sponsor:** \$1,000, prominent display of your company banner at bar & tee-sign on course

_____ **Gift Sponsor:** \$500, prominent display of your company banner at gift table & tee-sign on course

Note: The above sponsorships are available on a first-come basis and limited to one per type. All sponsors and item donors will be recognized on a sign at the registration table and listed in the Archmerian.

_____ **Item Donations for raffle prizes: (description)** _____

If you are purchasing a sponsorship please fill out your Name, Year and Company Name (if applicable) to be displayed. *Must be received by August 18, 2008.*

Name: _____ **Year:** _____

Company Name: _____

C. METHOD OF PAYMENT PAY:

By Internet: www.archmere-alumni.org/golf.htm

By Mail: Sent this completed reservation form to:
Archmere Academy Alumni Association
P.O. Box 252, Claymont, DE 19703

By Fax: Fax this completed reservation form to 302-798-7290, Attn: Stephanie Green

Credit Card (circle one) Master Card Visa Discover AMEX

Card Number _____ Expiration Date _____

Name (as it appears on card) _____

Signature _____

Check enclosed in the amount of \$ _____ payable to "Archmere Academy"

Daytime Phone # _____ E-mail Address _____

Any questions, please contact Mike Boyle '95 at boyle.mike@dvg.com
OR John Mulhern '00 at mulhs1982@yahoo.com, Golf Outing Co-Chairs.

We Thank You for your Support and look forward to another great event!