

TONY'S  PROSTATE CANCER RESEARCH  
A 501(c)(3) not for profit organization

*Joins Forces with the Major League Baseball Players Alumni Association  
to Bring Houston the  
SWING WITH THE LEGENDS CHARITY GOLF SERIES*



*benefiting*

*Research to find a Non-Invasive Cure of Prostate Cancer at*

*The University of Texas, M.D. Anderson Cancer Center*

*Monday, April 11, 2011 ~ 10:00 a.m. until 8:00 p.m.*

*Redstone Golf Club – Home of the PGA Event - Shell Houston Open*

**Sponsorship Opportunities**

**HALL OF FAME SPONSOR - \$20,000**

*Includes 20 Playing spots in golf event  
Two Full page ads in Program  
Three (3) hole sponsorship signs  
Signage at the Registration and Dinner  
Priority seating at Awards Dinner  
20 Autographed baseballs  
Opportunity to include promotional items in  
all players gift packs*

**MERCHANDISE SPONSOR \$20,000**

***Underwriting of Player merchandise***

*Includes 8 Playing spots in golf event  
Full page ad in Program  
Opportunity to have company logo on  
Players' merchandise*

**MVP SPONSOR - \$15,000**

*Includes 16 Playing spots in golf event  
Full page ad in Program  
Priority seating at Awards Dinner  
Two (2) hole sponsorship signs  
Signage at the Registration and Dinner*

**ALL STAR SPONSOR - \$10,000**

*Includes 12 Playing spots in golf event  
Full page ad in Program  
Two (2) hole sponsorship signs  
Signage at the Registration and Dinner*

**HOLE in ONE SPONSOR - \$5,000**

***Payment for Hole in One Insurance***

*Includes 4 Playing spots in golf event  
Full page ad in Program  
Significant signage on hole in one hole*

**CY YOUNG SPONSOR - \$5,000**

*Includes 8 Playing spots in golf event  
Full page ad in Program  
Two (2) hole sponsorship signs*

**HOLE SPONSOR \$1,200**

*One (1) hole sponsorship sign  
Recognition in Program*

**HOME RUN SPONSOR - \$3,000**

*Includes 4 Playing spots in golf event  
½ page ad in Program*

**SEE DETAILED SPONSORSHIP FORMS FOR FURTHER INFORMATION ON EACH SPONSOR LEVEL**

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\_\_\_\_\_ I am unable to attend the event, but would like to make a donation of \$ \_\_\_\_\_

**CONTACT INFORMATION:**

Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
Phone Number: \_\_\_\_\_ Fax: \_\_\_\_\_  
Email: \_\_\_\_\_

**PAYMENT INFORMATION:**

Check (made payable to Tony's Prostate Cancer Research) for: \$ \_\_\_\_\_  
Credit Card: \_\_\_\_\_ American Express \_\_\_\_\_ MasterCard \_\_\_\_\_ VISA  
Account Number: \_\_\_\_\_ Exp. Date: \_\_\_\_\_  
Name as it appears on Card: \_\_\_\_\_  
Credit Card Billing Address: \_\_\_\_\_  
Signature: \_\_\_\_\_

**PLEASE MAIL OR FAX THIS FORM TO MEET PRINTING DEADLINE : March 15, 2011**

**Tony's Prostate Cancer Research  
Tony Masraff  
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Fax: 281-469-0526**

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