



Dear Friend,

At Chester County Hospital, we are dedicated to giving every baby in our community a healthy start in life. For new families in crisis, this means having the expertise of skilled physicians and nurses, compassionate care, and a partnership with Children's Hospital of Philadelphia (CHOP) to handle the most challenging cases. Even as neighboring health care providers step away from caring for Women & Children's health needs, Chester County Hospital is investing in renovating and expanding our Level III NICU to deliver on our mission to serve the needs of our community and bring world class care close to home.

The Neonatal Intensive Care Unit (NICU) at The Chester County Hospital is located in the heart of our maternity unit to manage the care of babies who have special medical concerns. We have the most advanced NICU certification in the county. Our Level III certification allows us to administer the specialized needs of infants who require advanced care upon birth.

Our NICU is led by a team of in-house neonatologists from CHOP on staff at Chester County Hospital and complemented by skilled nurse specialists 24 hours a day, 7 days a week. The care we provide is life-saving, family-centered, attentive, and is individualized to the needs of the tiniest patient. This level of care is only possible with the support of friends like you.

The FORE Health Golf Invitational is an important source of funding for the NICU and health services for women and children at Chester County Hospital. This year's tournament takes place on **Monday, May 22, 2017** at White Manor Country Club in Malvern. In 2017, the hospital is also celebrating its 125th Anniversary and we are aiming to have the most successful golf outing yet. We hope we can count on your continued support. Together we can make a difference in the lives of our tiniest patients and their families.

Enclosed, please find the benefits you will enjoy as a Sponsor and participant of the FORE Health Golf Invitational. Thank you for your support and consideration. We look forward to seeing you at White Manor Country Club!

Sincerely,

Lauren Roscovich
Manager of Events and Fundraising
Chester County Hospital Foundation



The Chester County Hospital
FORE HEALTH INVITATIONAL
Benefiting health services for women and children

2017 SPONSORSHIP OPPORTUNITIES & BENEFITS

Presenting Sponsor: \$10,000 (Limit 1)

- 3 Foursomes & player gifts
- Recognition in program, website & sponsor board
- Banner hung at Registration and Dinner
- 5 additional guests for Dinner & Awards
- Logo featured on all golfer tee sheets
- Table tent recognition at Dinner
- Sponsorship signage at two holes

Miracles and Memories Dinner Sponsor: \$7,500 (Limit 1)

- Exclusive sponsor of Dinner & Awards
- Recognition at entrance to Dinner & Awards celebration
- 2 Foursomes & player gifts
- 4 additional guests for Dinner & Awards
- Sponsorship signage at two holes
- Recognition in program, website & sponsor signage

Apparel/Gift Sponsor: \$6,500 (Limit 1)

- Company Name/logo featured on all player gifts
- 2 Foursomes & player gifts
- 2 additional guests for Dinner & Awards
- Sponsorship signage at one hole
- Recognition in program, website & sponsor signage

Platinum Sponsors: \$5,500

- 2 Foursomes & player gifts
- Sponsorship signage at one hole
- Recognition in program, website & sponsor signage

Contest Sponsor: \$4,000 (Limit one)

- 1 Foursome & player gifts
- Signage on Longest Drive and Closest to the Pin Contests
- Recognition in program, website & sponsor board

Driving Range and Putting Green Sponsors: \$3,500 (Limit 1 each)

- 1 Foursome & player gifts
- Signage on practice green or driving range
- Recognition in program, website & sponsor signage

Gold Sponsors: \$3,000

- 1 Foursome & player gifts
- Recognition in program, website & sponsor signage

Refreshment Sponsors: \$2,000 (Limit 2)

- Signage on course refreshment stand
- 1 Twosome & player gifts
- Recognition in program, website & sponsor signage

Silver Sponsors: \$1,750

- 1 Twosome & player gifts
- Recognition in program, website & sponsor signage

Hole Sponsor: \$395

- Signage on one hole on the course

Questions?

Contact Lauren Roscovich at 610-431-5328 or
Lauren.Roscovich@uphs.upenn.edu

Please confirm sponsorship by May 1, 2017 – Thank you!

Please make a copy for your records. Donations are tax deductible to the extent allowable by law

Donations: We are proud to welcome your support even if you cannot enjoy golfing with us. 100% of your donation will go toward health services for women and children at Chester County Hospital. All donations will be recognized in the event program. *Donations are tax-deductible to the extent allowable by law.*



The Chester County Hospital
FORE HEALTH INVITATIONAL
Benefiting health services for women and children

2017 SPONSORSHIP REGISTRATION FORM

Thank you for your interest in sponsoring the 2017 FORE Health Invitational! Please complete the form below by May 1, 2017. We ask that you email all golfer names, emails and golfer handicaps to Lauren Roscovich no later than Monday, May 15, 2017. Any questions please contact Lauren Roscovich at 610-431-5328 or Lauren.Roscovich@uphs.upenn.edu

Schedule of Events:

- 11:00 am: Registration Opens
- 11:30 am: Lunch
- 12:30 pm: Shotgun Start, Scramble Format
- 5:30 pm: Cocktail Hour, 6:30 pm: Miracles & Memories Dinner with awards and presentations

Sponsor Details:

Sponsor Name _____

Contact Name _____

Contact Email: _____

City, State, Zip: _____

Phone: _____

Participant 2: _____

Participant 3: _____

Participant 4: _____

Sponsor Amount (Please Check):

- | | |
|--|---|
| <input type="checkbox"/> Presenting Sponsor: \$10,000 (Limit 1) | <input type="checkbox"/> Driving Range & Putting Green Sponsor: \$3,500 (Limit 1 per) |
| <input type="checkbox"/> Miracles and Memories Dinner Sponsor: \$7,500 (Limit 1) | <input type="checkbox"/> Gold Sponsor: \$3,000 |
| <input type="checkbox"/> Apparel/Gift Sponsor: \$6,500 | <input type="checkbox"/> Refreshment Sponsor: \$2,000 |
| <input type="checkbox"/> Platinum Sponsor: \$5,500 | <input type="checkbox"/> Silver Sponsor: \$1,750 |
| <input type="checkbox"/> Contest Sponsor: \$4,000 (Limit 1) | <input type="checkbox"/> Hole Sponsor: \$395 |

Sponsor Payment Options:

- Enclosed is a check for \$_____ payable to "Willistown Auxiliary". Checks should be mailed to The Chester County Hospital Foundation (Attn: FORE Health Invitational), 701 E. Marshall Street West Chester, PA 19380
- Please charge my credit card:
- Card Type: MasterCard Visa American Express Discover
- Card # _____ Expiration Date _____ Amount \$ _____
- Signature: _____

Please return this form:

- By mail to the Chester County Hospital Foundation
- Email to Lauren.Roscovich@uphs.upenn.edu
- Fax 610.738.2830

Please confirm sponsorship by May 1, 2017. Thank you for your support!





2017 | PARTICIPANT & DINNER REGISTRATION

Join us on Monday, May 22, 2017 at White Manor Country Club for a wonderful day of golf and celebration as we raise funds benefiting health services for women and children at Chester County Hospital.

Schedule of Events:

Monday, May 22, 2017 at White Manor Country Club (831 Providence Rd, Malvern, PA 19355)

11:00AM	Registration Opens
11:30AM	Lunch Begins
12:30PM	Shotgun Start
5:30PM	Cocktail Hour
6:30PM	Miracles & Memories Dinner with awards and presentations

Registration Details:

The Invitational is a scramble format. All player fees include greens fees, cart, gift, lunch, on-course refreshments, dinner & charitable donation. Dinner only participation includes cocktail hour and dinner. To participate, complete the Participant Registration Form. Space is limited; please register by May 1, 2017. If you have any questions, contact Lauren Roscovich at lauren.roscoovich@uphs.upenn.edu or 610.431.5328.

Contact Name _____

Company Name _____

Address _____

City, State, Zip _____

Phone _____

Email _____

Participant 1 _____

Participant 2 _____

Participant 3 _____

Participant 4 _____

Level of Participation:

- Golf & Dinner Foursome \$1,200
- Golf & Dinner Individual \$300
- Dinner Only Individual \$120
- Donation Only Amount: _____

Payment Options: (check one)

- Enclosed is a check for \$_____ payable to "Willistown Auxiliary" (memo: FORE Health)
- Please charge my credit card
 Card Type: ___ MasterCard ___ Visa ___ American Express ___ Discover
 Card # _____ Expiration Date _____
 Amount \$ _____ Signature: _____

Please return this form:

- By Email to lauren.roscoovich@uphs.upenn.edu
- By Fax – 610.738.2830
- By Mail to: The Chester County Hospital Foundation

Thank You. Your support is greatly appreciated!
 Please make a copy for your records. Donations are tax deductible to the extent allowable by law.

