

1979

**CEDARS GOLF CLASSIC**

2020



# **42<sup>ND</sup> ANNUAL CEDARS GOLF CLASSIC**

**IN COLLABORATION WITH  
THE MONTREAL GENERAL HOSPITAL FOUNDATION**

**Monday, June 15, 2020  
The Royal Montreal Golf Club**

**SPONSORSHIP OPPORTUNITIES**



## 42<sup>ND</sup> ANNUAL CEDARS GOLF CLASSIC

The Cedars Cancer Foundation and the Montreal General Hospital Foundation (MGHF) are pleased to partner for the 42nd Annual Cedars Golf Classic. This event will support Cedars Cancer Centre priority needs as well as the Montreal General Hospital's priority needs in surgical oncology. These funds will serve to fulfill top priorities in patient care, research and education across the continuum of life, from pediatric, adolescent and adult care to survivorship, supportive and palliative care.

### DATE

Monday, June 15<sup>th</sup>, 2020

### LOCATION

The Royal Montreal Golf Club  
Ile Bizard, Quebec

### GOLF FEES

Single	\$1,250
Foursome	\$5,000

### SCHEDULE

10:30 a.m.	– Player Registration, Pre-Golf Brunch, Practice
12:30 p.m.	– Shotgun Start
6:00 p.m.	– Cocktail, Reception and Dinner



42<sup>ND</sup> ANNUAL  
CEDARS GOLF CLASSIC  
MONDAY, JUNE 15, 2020

## SPONSORSHIP OPPORTUNITIES

### PLATINUM SPONSOR

\$25,000

- Exclusive title sponsorship of the event
- Corporate name and logo displayed prominently on tournament banner
- Corporate banner displayed at registration desk
- Corporate recognition on the Cedars Cancer Foundation website and the Montreal General Hospital Foundation website
- Logo recognition on sponsor boards
- Corporate hole signage on the Blue and Red courses
- Acknowledgment in all print and digital communication & Ad in program book
- Sponsor recognition cards at dinner
- 1 golf foursome (includes brunch, cocktail & dinner for each golfer)

### GOLD SPONSOR

\$20,000

- Corporate name and logo displayed prominently on tournament banner
- Corporate recognition on Cedars Cancer Foundation and Montreal General Hospital Foundation websites with link
- Corporate hole signage on the Blue and Red courses
- Acknowledgment in all print and digital communication & Ad in program book
- Sponsor recognition cards at dinner
- 1 golf foursome (includes brunch, cocktail & dinner for each golfer)

### GOLF CART SPONSOR

\$12,000

- Only one available
- Logo recognition on all golf carts and event sponsor boards
- Acknowledgment in all print and digital communication
- Sponsor recognition cards at dinner
- 1 golf foursome (includes brunch, cocktail & dinner for each golfer)

### SILVER SPONSOR

\$10,000

- Logo recognition on sponsor boards
- Corporate hole signage on the Blue and Red courses
- Acknowledgment in all print and digital communication & Ad in program book
- Sponsor recognition cards at dinner
- 1 golf foursome (includes brunch, cocktail & dinner for each golfer)

### GOLFER FOURSOME

\$5,000

- 1 golf foursome (includes brunch, cocktail & dinner for each golfer)
- Corporate hole signage on the Blue and Red courses

### BRUNCH SPONSOR • COCKTAIL SPONSOR \$6,000

- Sponsor signage with brand representation displayed in the brunch area and/or cocktail area

### HOLE SPONSOR \$2,000

- Sponsor signage with brand representation on one hole, the Blue and Red courses

## PROGRAM BOOK

- Full page \$1000
- 1/2 page \$750
- 1/4 page \$500



42<sup>ND</sup> ANNUAL  
CEDARS GOLF CLASSIC  
MONDAY, JUNE 15, 2020

SPONSORSHIP • GOLFER REGISTRATION FORM

SPONSORSHIP OPPORTUNITIES

- |  |   |
|--|---|
| <input type="checkbox"/> Platinum Sponsor ..... \$25,000 | <input type="checkbox"/> Golf Carts Sponsor ..... \$12,000      |
| <input type="checkbox"/> Gold Sponsor ..... \$20,000     | <input type="checkbox"/> Brunch Sponsor ..... \$6,000           |
| <input type="checkbox"/> Silver Sponsor ..... \$10,000   | <input type="checkbox"/> Cocktail Sponsor ..... \$6,000         |
| <input type="checkbox"/> Golfer Foursome ..... \$5,000   | <input type="checkbox"/> Hole Sponsor (2 courses) ..... \$2,000 |

Sponsors will have their logo displayed at the event and in associated printed and digital materials.  
Note: A Business/Official Tax Receipt will be issued for your donation portion in accordance with CRA Guidelines.

INDIVIDUAL GOLFERS

- Individual Golfers ..... \$1,250                      QTY \_\_\_\_\_ \$ \_\_\_\_\_

DONATION ONLY

- I regret that I cannot attend the event, but would like to enclose a donation:                      \$ \*
- \* A tax receipt will be issued for all donations of \$18 or more.

PERSONAL AND BILLING INFORMATION

- Corporate donation                       Personal donation                       Invoice

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

Company: \_\_\_\_\_  
\* The tax receipt will be issued to the name or company specified

Address: \_\_\_\_\_

City: \_\_\_\_\_ Province: \_\_\_\_\_ Postal code: \_\_\_\_\_

Email: \_\_\_\_\_ Telephone: \_\_\_\_\_

- VISA                       MasterCard                       AMERICAN EXPRESS                       Cheque\*                       Amount: \$ \_\_\_\_\_

\*Cheque payable to **The Montreal General Hospital Foundation re: Golf Tournament**

Cardholder name: \_\_\_\_\_

\* Please note that tax receipt will be issued in card holder's name.

Card number: \_\_\_\_\_ Expiry date: \_\_\_\_\_ m | \_\_\_\_\_ yy

FOURSOME GOLFER NAMES

HANDICAP

EMAIL

TELEPHONE

Group Name:

1.			
2.			
3.			
4.			

The Montreal General Hospital Foundation  
1650 Cedar Ave, bureau E6 129, Montréal QC H3G 1A4  
T: 514-934-8230  
Charity Registration Number: 119000974RR0001



42<sup>ND</sup> ANNUAL  
CEDARS GOLF CLASSIC  
MONDAY, JUNE 15, 2020

PROGRAM BOOK ADVERTISEMENT ORDER FORM

AD SIZE AND PRICING\*

- |  |  |
|--|--|
| <input type="checkbox"/> Full page.....\$1,000 | <input type="checkbox"/> 1/4 page.....\$500      |
| <input type="checkbox"/> 1/2 page.....\$750    | <input type="checkbox"/> Use the same ad as 2019 |

AD MESSAGE

---



---



---



---

Notes: \* Tax receipt will be issued for all personal messages \* Please print your message - max. 100 characters  
\* Business receipt will be issued for all Ads

PERSONAL AND BILLING INFORMATION

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

Company: \_\_\_\_\_

\* The tax receipt will be issued to the name or company specified

Address: \_\_\_\_\_

City: \_\_\_\_\_ Province: \_\_\_\_\_ Postal code: \_\_\_\_\_

Email: \_\_\_\_\_ Telephone: \_\_\_\_\_

VISA  MasterCard  American Express  Cheque\*  Amount: \$ \_\_\_\_\_

\*Cheque payable to **The Montreal General Hospital Foundation re: Golf Tournament - Program Book**

Cardholder name: \_\_\_\_\_

Card number: \_\_\_\_\_ Expiry date: \_\_\_\_\_ m | \_\_\_\_\_ yy

\* Please note that tax receipt will be issued in card holder's name.

IMPORTANT DEADLINE INFORMATION

- Choose whether you would like an **advertisement** or a **personal message** in the program book.
- Please submit print-ready pdf or high resolution jpeg files.
- Ad must fit into the designated dimensions on the back page - will resize as needed.
- All ads are due by **Friday, May 15, 2020**.
- Payment is due with order.

The Montreal General Hospital Foundation  
1650 Cedar Ave, bureau E6 129, Montréal QC H3G 1A4  
T: 514-934-8230  
Charity Registration Number: 119000974RR0001



**1/2 Page**  
8" w X 5" h  
\$750

**1/4 Page**  
3.75" w X 5" h  
\$500

**Full Page**  
8" w X 10.25" h  
\$1,000