

Niagara Cup Classic Registration Form

Please sign me up for the following:

- Gold Sponsorship** - \$1,250
- Silver Sponsorship** - \$750
- Bronze Sponsorship** - \$375
- AM Individual Golfer** - \$200 (Discounted Rate)
- PM Individual Golfer** - \$225
- Hole Sponsorship** - \$200 (Golf not included)
- Dinner Only** - \$100

* Please indicate dinner selection for hole sponsor or dinner guest.

* Additional tournament sponsorship opportunities are included in this packet.

My sponsorship sign should read: _____

I am unable to attend. Please accept my donation.

Payment information:

Check(s) enclosed
(made payable to **Memorial Medical Center Foundation**)

- MasterCard Visa
- American Express Discover

Exp. Date _____

Signature _____

FLIGHT: Morning Afternoon
(please circle one)

Name: _____

Phone: _____

Address: _____

E-mail: _____

Dinner # _____

Golfer#2: _____

Phone: _____

Address: _____

E-mail: _____

Dinner # _____

Golfer#3: _____

Phone: _____

Address: _____

E-mail: _____

Dinner # _____

Golfer#4: _____

Phone: _____

Address: _____

E-mail: _____

Dinner # _____

DINNER Selections:

Prime Rib (#1)

Chicken Marsala (#2)

Pasta & Veggies (#3)

I / we will not be attending the dinner.

**This registration form is available
on-line at: nfmcc.org/events**

Fax or email your form to:
(716) 278-4614 or cara.turner@nfmcc.org