

20th Annual Master's Cup Charity Golf Event

-To Benefit-

St. Jude Children's Research Hospital

SPONSORSHIP REGISTRATION

Friday May 16, 2025 Aldeen Golf Club

☐ **Matching Donation Dollar Amount*** \$_____ (Specific dollar amount capped)

PAYMENT METHOD: ☐ Invoice Me ☐ Check

☐ **Donation Dollar Amount*** \$_____

PAYMENT METHOD: ☐ <http://fundraising.stjude.org/goto/MC4SJ> ☐ Check

**Includes: Displayed During on Screen Awards Presentation and Displayed on the Masters Cup Website
www.masterscupstjude.org*

☐ **Donate an item or gift card** valued at \$50 or more to be included in our Silent Auction*.

☐ **Donate an item or gift card** valued at \$500 or more to be included in our Live Auction*.

**Includes: Displayed During on Screen Awards Presentation, and Displayed on the Masters Cup Website
www.masterscupstjude.org*

Name of Item: _____ Estimated Dollar Value: \$_____

Please provide a brief description of the item you are donating: _____

CONTACT INFORMATION:

Company, Organization or Donor Name: _____

Contact Person: _____ Contact Phone: _____

Email Address: _____ Mailing Address: _____

State: _____ Postal Code: _____

Charity Event Representative: _____ Email Address: _____

Deadline May 1, 2025

**Thank you for your generosity 100% of the proceeds goes directly to
St. Jude Children's Hospital (Tax ID 62-0646012)**