

Unified Community Connections 19th Annual Golf Classic

Elkridge Club
6100 N. Charles Street
Baltimore, MD 21212
Monday, May 5, 2025

Check-In & Lunch: 11:30 AM—1:00 PM
Shotgun Start: 1:00 PM
Cocktail Party: 6:00 PM—8:00 PM
Awards: 7:00 PM



PART ONE: MAIN CONTACT NAME & ADDRESS

Name: _____
Street Address: _____
City: _____ State: _____ Zip: _____
Daytime Phone: _____ Email: _____

PART TWO: FOURSOME INFORMATION

Player 1: _____ Email: _____ Handicap: _____
Player 2: _____ Email: _____ Handicap: _____
Player 3: _____ Email: _____ Handicap: _____
Player 4: _____ Email: _____ Handicap: _____

PART THREE: GOLF OUTING PRICES *(Sponsor logos due to LBUSSARD@unified.org by Fri., April 11 for signage purposes.)*

_____ = # _____ X **\$75 Individual Cocktail Party Guest**—post-tournament hors d'oeuvres & cocktails ONLY - no golf
_____ = # _____ X **\$375 Individual Golf Registration**—*all golfers receive a gift, food, and access to the Cocktail Party*
_____ **\$1,200 Foursome**— *early bird price* (increase to \$1,400 starting April 1)
_____ **\$750 Hole Sponsor**—includes 2 Cocktail Party guests
_____ **\$1,500 Foursome + Hole Sponsor**— *early bird price* (increase to \$1,700 starting April 1)
includes 1 foursome & a hole sign
_____ **\$2,000 Power Up Sponsor**— includes 1 foursome & signage on Power Up hole
_____ **\$2,500 Masters Putt Sponsor**— includes 1 foursome & signage on Masters Putt Contest
_____ **\$3,000 19th Hole Snack & Beverage Sponsor**— includes 1 foursome & signage at snack and cooler station
_____ **\$5,000 Cart Sponsor**—includes 1 foursome, premium event signage & 2 extra Cocktail Party guests
_____ **\$7,000 Fairway Fare Sponsor**—includes 2 foursomes, premium event signage & 2 extra Cocktail Party guests
_____ **\$7,000 Bar Sponsor**—includes 2 foursomes, premium event signage & 2 extra Cocktail Party guests
_____ **\$10,000 Presenting Sponsor**—includes 2 foursomes, signature event signage & 4 extra Cocktail Party guests
_____ Please accept this *donation* as I am unable to attend

PART FOUR: PAYMENT

_____ Check _____ VISA _____ MasterCard _____ Amex _____ Discover

_____ Online at www.unified.org/donate/

Name on Card: _____ Exp. Date: _____

Card Number: _____ CVV #: _____

Billing Zip: _____ Signature: _____

Please make checks payable to:

Unified Community Connections
Attention: Lauren Bussard
952 Ridgebrook Rd.
Unit #1000
Sparks, MD 21152
443-449-2461
LBUSSARD@unified.org
www.unified.org/golf-classic/