NEW YORK STATE BUILDING OFFICIALS CONFERENCE

WESTCHESTER CHAPTER



PROUDLY INVITES YOU TO ATTEND ITS

7THANNUAL GOLF OUTING

AT THE

MOUNT KISCO COUNTRY CLUB MOUNT KISCO, NY

MONDAY, SEPTEMBER 16, 2024

A PORTION OF THE PROCEEDS TO BENEFIT NYSBOC-WESTCHESTER CHAPTER AND CEREBRAL PALSY OF WESTCHESTER

Mulligans—\$50!

Event Schedule

Raffle & Auction!

9:30 am - Registration

10:00 am - Continental Breakfast

11:30 am - Shotgun Start BBQ Lunch & Refreshments on Course

5:00 pm - Cocktail Hour with Open Bar

6:00 pm - Buffet Awards Dinner with cash bar

Please note: Golf Carts included, no caddies

Please mail check & registration form to: Frank Diodati, Westchester NYSBOC 1001 Post Road Scarsdale, NY 10583

For more information you may also contact Stephanie Russo at Cerebral Palsy of Westchester at 914-937-3800 ext. 411 or email Stephanie.Russo@cpwestchester.org

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Payment by checks only, no credit cards (checks and cash will be accepted at event)

	Sponsorship Packages		Event & Player Opportunities
	Event Sponsor \$3,000 1 Foursome, 4 Additional dinner guests, 1 Tee Box sponsorship sign, sponsor recognition award and prominent listing on all event literature and event banner.		Foursome Package \$1,500 4 Golf Reservations 4 Breakfast, Lunch & Dinner Reservations Individual Golfer \$375 1 Golf Reservation; 1 Continental Breakfast, Lunch
	Corporate Sponsor \$500 2 dinner reservations, 1 Tee Box sponsorship sign, sponsor recognition award and prominent listing on all event literature.		and Dinner Reservation Mulligans — 3 per foursome \$50 Can also be purchased at event
	Hole Sponsor \$100 1 hole sponsorship sign and recognition in event program.		Dinner \$125 per person 1 Dinner Reservation (Cocktail Hour & Awards Dinner at 5 pm) Golfer Goodie Bag Donation
	Tee Sponsor \$100 1 hole sponsorship sign and recognition in event program.		Include a promotional item in our registration goodie bag. I will donate 120 items for the Golfer goodie bag,. Items (120 count) must be received by September 5, 2024.
SPONSOR REGISTRATION INFORMATION			
Please write clearly, information given below will appear on event program. Sponsor Name to be listed on Program Company			
	s		
City State Zip Phone Fax			
Email			
Enclosed is my check made payable to: Westchester NYSBOC in the amount of \$			
GOLF / DINNER REGISTRATION INFORMATION			
Name(s)		Circle one: Golfer with Breakfast & Dinner / Dinner Only Name(s) Company	
		Address	
- D1	State Zip	City	State Zip
	State Zip	City Phone _	StateZip
Email _	StateZip	City Phone _ Email	StateZip
Email	State Zip	City Phone Email Circle one	State Zip
Email Circle on Name(s	State Zip	City Phone Email Circle one Name(s)	StateZip
Circle on Name(s Compan	State Zip De: Golfer with Breakfast & Dinner / Dinner Only Output Description:	City Phone Email Circle one Name(s) Compan Address	State Zip
Circle on Name(s Compan Address City	State Zip Die: Golfer with Breakfast & Dinner / Dinner Only Diny State Zip	City Phone Email Circle one Name(s) Compan Address City	StateZip
Circle on Name(s Compan Address City Phone _	State Zip De: Golfer with Breakfast & Dinner / Dinner Only Output Description:	City Phone Email Circle one Name(s) Compan Address City Phone	State Zip