



THRIVE

All proceeds will benefit Thrive's ministry to at-risk youth.

DEEP RELATIONSHIPS. AMAZING GROWTH.

Thrive connects caring adults and at-risk youth through gospel-based relationships.

We partner with communities to pursue spiritual, emotional, academic, and physical wholeness. Our Christian youth programming is currently in five communities throughout Knoxville, TN: Lonsdale, New Hopewell, Papermill, Parkridge, and West View.

Learn More Here:



Facebook & Instagram:
@helpusthriveofficial

www.helpusthrive.com



DON CAMPBELL MEN'S GOLF TOURNAMENT FUNDRAISER

MONDAY, MAY 13TH
8AM | BREAKFAST AT 7:30

WILLOW CREEK GOLF CLUB
12003 KINGSTON PIKE
KNOXVILLE, TN 37934

SPONSORSHIP OPPORTUNITIES



SCRAMBLE FORMAT - BEST BALL
Country Club Casual
(no t-shirts or jeans)

TITLE SPONSOR \$10,000

- Prominent logo placement on golf carts
- Three complimentary foursomes
- Hole sponsor signage at five holes
- Banner at food pavilion
- Six-foot table at lunch for business promotion
- Logo included on all marketing materials
- Introduced as Title Sponsor at breakfast and lunch with opportunity to speak at the event
- Tee Sign

IMPACT SPONSOR \$5,000

- Entry for one team (4 players)
- Hole sponsor signage at three holes
- Logo included on all marketing materials
- Introduced as Impact Sponsor at breakfast

CORPORATE SPONSOR \$1,500

- Entry for one team (4 players)
- Corporate logo on banner
- Tee sign

TEE SPONSOR \$500

- Signage included

WAYS TO GET INVOLVED

- Title Sponsor - \$10,000
- Impact Sponsor - \$5,000
- Corporate Sponsor - \$1,500
- Play as a team of 4- \$800
- Tee Sponsor - \$500
- Support Thrive with a financial gift of any amount: \$ _____

FOR MORE INFORMATION
on sponsoring, contact Lori Bertelkamp McKelvy:
lori@helpusthrive.com

TEAM NAME:

1 _____

2 _____

3 _____

4 _____

REGISTRATION

Return this form to Thrive with payment enclosed or register & pay online:
www.helpusthrive.com/mens-golf-2024

Name: _____

Address: _____

City, State: _____

Zip code: _____

Email: _____

Phone: _____

___ Check (must be mailed to Thrive)

___ Credit Card (Visa or Mastercard)

Card #: _____

Exp. Date: ____/____

CVC code: _____

Signature: _____

Please make checks payable to Thrive.

**MAIL TO P.O. BOX 51611
KNOXVILLE, TN 37950.**