

# GOLFER REGISTRATION

To ensure proper hole assignments, please fill in the names and addresses of the golfers in your foursome.

● My Name: \_\_\_\_\_

● ● Player 2 Name: \_\_\_\_\_

Company: \_\_\_\_\_

Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

Phone: \_\_\_\_\_

Email: \_\_\_\_\_

● ● ● Player 3 Name: \_\_\_\_\_

Company: \_\_\_\_\_

Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

Phone: \_\_\_\_\_

Email: \_\_\_\_\_

● ● ● ● Player 4 Name: \_\_\_\_\_

Company: \_\_\_\_\_

Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

Phone: \_\_\_\_\_

Email: \_\_\_\_\_

## Board of Trustees

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Joseph E. Enright Foundation  
P. O. Box 519  
Summit, NJ 07902-0519

# 2011 Joseph E. Enright Foundation Golf Invitational



October 3, 2011

*Presented By*



*Hamilton Farm Golf Club  
Gladstone, NJ*

[www.josephenrightfoundation.org](http://www.josephenrightfoundation.org)

# EVENT SCHEDULE

Registration.....	10:00 am
Brunch.....	10:00 am - 11:30 am
Shotgun Start .....	11:45 am
Reception .....	6:00 pm
Awards Dinner.....	7:00 pm

## Celebrities Appearing:

Rick Cerone NY Yankees	Ken Daneyko NJ Devils
Gerry Cooney Heavyweight Boxer	Bart Oates NY Giants
John Starks NY Knicks	



## EVENT FORMAT

Individual Stroke



## CONTESTS

Hole in One Prize:  
2011 Automobile

Longest Drive  
*Men's & Ladies*



Closest to the Pin  
*Front & Back Nines*

**J**oe Enright was an internal medicine physician at the Summit Medical Group. After only 4 short years of practice in Summit, he passed away from malignant melanoma in 1996 at the age of 37. In 1999, a group of his friends and colleagues formed the Joseph E. Enright Foundation, a non-profit organization to promote health related causes in our community.

Since 2004, the Enright Foundation has offered twice yearly Health Education Scholarships to students pursuing a career in the field of healthcare. With skin cancer prevention and sun safety as our main focus, we continue to work with our partners in the healthcare field to promote better "Health Through Education".

# WAYS TO PARTICIPATE

## Double Eagle Sponsor **\$25,000**

Our most prestigious sponsorship includes:  
Name and logo on tee box markers  
Signage throughout the event  
Golf for Four  
Set of irons for four (4) golfers of your choice

## Eagle Sponsor **\$15,000**

This prominent sponsorship includes:  
Signage throughout the event  
Golf for Four  
Driver for four (4) golfers of your choice

## Birdie Sponsor **\$7,500**

Prominent sponsorship includes:  
Signage throughout the event  
Golf for Four  
Special sponsor gift for four (4) golfers of your choice

**The following sponsorships include signage and listing in event program:**

## Carts **\$2,500**

Your logo/message on all golf carts.  
*Maximum of four (4) sponsors.*

## Photos **\$1,500**

Your logo/message throughout reception slide presentation.  
*Maximum of two (2) sponsors.*

## Player Gifts **\$1,500**

## Bag Tags **\$1,250**

Your logo/business card on all golfers' bag tags.  
*One (1) sponsor only.*

## Awards Reception **\$1,000**

## On-Course Beverages **\$500**

## Driving Range & Putting Green **\$300**

## Tee **\$250**

## Individual Player **\$1,000**

## Reception and Dinner **\$125**

# REPLY CARD

- Double Eagle Sponsor.....\$25,000
- Eagle Sponsorship.....\$15,000
- Birdie Sponsorship.....\$7,500
- Carts Sponsor.....\$2,500
- Photos Sponsor.....\$1,500
- Player Gifts Sponsor.....\$1,500
- Bag Tags Sponsor.....\$1,250
- Awards Reception Sponsor.....\$1,000
- On-Course Beverages Sponsor.....\$500
- Driving Range & Putting Green Sponsor.....\$300
- Tee Sponsor.....\$250
- Player.....\$1,000
- Reception & Dinner.....\$125
- I am unable to participate but would like to make the following donation: \$\_\_\_\_\_

Tax Deductible Information Available Upon Request.

**Please fill in the names of the players in your group on the reverse side.**

I would like my sponsor sign to read as follows:

Or email High Res LOGO (JPG, TIFF, AI, or PDF) to address below.

Name: \_\_\_\_\_  
Company: \_\_\_\_\_  
Address: \_\_\_\_\_  
City/State/Zip: \_\_\_\_\_  
Phone: \_\_\_\_\_  
Fax: \_\_\_\_\_  
Email: \_\_\_\_\_

I would like to use the following payment option:

Check  Visa  MasterCard

CC#: \_\_\_\_\_  
Exp. Date: \_\_\_\_\_ Amount: \$ \_\_\_\_\_  
Signature: \_\_\_\_\_

Make checks payable to: Joseph E. Enright Foundation  
Tax ID # 22-3680835

Return to: Joseph E. Enright Foundation  
c/o TGMG  
46 Oak Ridge Road  
Basking Ridge, NJ 07920

For information call: Jamie Gacos - 908-953-9852  
jgacos@golfmgtgroup.com