

Registration
6th Annual
Warminster Rotary
Golf Outing
\$150 per player

GOLFER INFORMATION

PLAYER 1 NAME: _____

PLAYER 1 PHONE NUMBER: _____

PLAYER 1 EMAIL: _____

PLAYER 2 NAME: _____

PLAYER 2 EMAIL: _____

PLAYER 3 NAME: _____

PLAYER 3 EMAIL: _____

PLAYER 4 NAME: _____

PLAYER 4 EMAIL: _____

Friday April 24th
10:00 Shotgun Start

**8:15am Refreshments/
Registration**
10:00am Shotgun Start
3:00pm Awards/Lunch

Package Includes:
Driving Range
18 Holes with Cart
Team Scramble Format
Beer/Beverage Cart
Buffet Lunch

Prizes & Contests
Lowest Score
Most Honest Score
Closest to Pin
Longest Drive
Putting Contest

Pay online: warminsterrotary.org
Make Checks Payable to:
The Warminster Rotary Foundation

a 501(c)(3) organization with the corporate name:
Rotary Club of Warminster Foundation, Inc
EIN 45-3790852
PO Box 209, Warminster, PA 18974

6th Annual
WARMINSTER
ROTARY
GOLF OUTING



Friday, April 24th
10:00 Shotgun Start

1225 W. Street Road
Warminster, PA 18974



All proceeds support local and regional Rotarian efforts.



2026 Sponsorship Opportunities

TITLE SPONSOR \$10,000

- Tee gift and logo on rules sheet
- Logo on scoreboard
- One team in event (4 players)
- Two hole sponsor signs at hole #1
- Recognition before and after event

BREAKFAST SPONSOR \$5,000

- Naming rights for breakfast
- Logo on rules sheet
- One team in event (4 players)
- Two hole sponsor signs at hole #10
- Recognition before and after event

GOLF CART SPONSOR \$2,000

- (2) sponsorships available
- Sponsor logo in every golf cart
- One team in event (4 players)

BEVERAGE CART SPONSOR \$2,000

- (2) sponsorships available
- One team in event (4 players)
- 2 sponsor signs on beverage cart

LUNCH PACKAGE SPONSOR \$1,500

- Naming rights for lunch
- One team in event (4 players)
- One hole sponsor sign

HOLE SPONSOR PACKAGE \$700

- One team in event (4 players)
- One hole sponsor sign

HOLE SPONSOR \$160

- One hole sponsor sign

2026 Sponsor Information

SPONSOR PACKAGE INFORMATION

SPONSOR PACKAGE CHOICE: _____

CONTACT NAME: _____

BUSINESS NAME: _____

(A logo will be requested for signage)

SPONSOR ADDRESS: _____

CITY: _____

STATE: _____ ZIP: _____

PHONE: _____

EMAIL: _____

PAYMENT TYPE:

CHECK ENCLOSED _____ PAID ONLINE _____

VISA/AMEX/DISCOVER/MASTERCARD _____

CARD NUMBER: _____

CVV (3 or 4 Digit): _____ EXPIRATION DATE: _____

NAME ON CARD: _____

BILLING ADDRESS: _____

BILLING ZIP: _____ BILLING STATE: _____