



NORTH SHORE-
LONG ISLAND JEWISH
HEALTH SYSTEM



Island Hills Golf & Country Club

Sponsor Application

- | | |
|--|---------|
| <input type="checkbox"/> HOLE SPONSOR | \$185 |
| <input type="checkbox"/> BREAKFAST SPONSOR | \$300 |
| <input type="checkbox"/> LUNCH SPONSOR | \$450 |
| <input type="checkbox"/> COCKTAIL HOUR SPONSOR | \$700 |
| <input type="checkbox"/> DINNER SPONSOR | \$1000 |
| <input type="checkbox"/> TOURNAMENT SPONSOR | \$1,200 |

All of the above sponsorships will include your company name or your name prominently displayed the day of the Golf Outing. All proceeds will be donated to Schneider Children's Hospital, Children's Medical Fund and North Shore/Long Island Jewish Health System.

Make Check payable to: Bob Coletti Memorial Golf Outing.

Name as you would like it to appear: _____

Contact Name: _____ Phone: _____

Address _____

Call for more information or return completed application to:

**Bob Coletti Memorial Golf Outing
c/o Dawnmarie Coletti-Salerno
8 Fernwood Drive
Commack, NY 11725
(631) 864-5313**