



**“Registration Form for the
African American Golfers Hall of Fame
& African American Collegiate and Youth Hall of Fame Conference,
Golf Tournament, Reception, Dinner, Auction, Awards & Celebration”**

African American
Collegiate & Youth
Golfers Hall of Fame



2020

Please print

Name: _____

Company: _____

Address: _____

City/State/Zip: _____ Area Code & Phone # _____

Email: _____

Please reserve the following:

Legends Golf Tournament (Two Person Team scramble) to benefit the AAC&YGHOF: May 22, 2020

_____ \$250.00 Two Person Team (Must be paid by or before April 20, 2020)

_____ \$125.00 Single Person (Must be paid by or before April 20, 2020. Will be paired with someone.)

AAGHOF /AAC&YGHOF Reception, Auction, Awards Dinner, Induction & Celebration : May 24, 2020

_____ \$200.00 pp Adult Ticket/ \$175.00 if paid by or before April 20, 2020

_____ \$100.00 pp Child Ticket (12 years and below)

_____ \$1,750.00 Table of 10 - Preferred sitting (If purchased by April 20, 2020)

_____ \$1,500.00 Table of 8 - Preferred sitting (If purchased by April 20, 2020)

“Early Bird” general package

_____ \$500.00 pp (If purchased by April 20, 2020)

Fish Fry: May 23 & Hospitality: May 21-24, 2019

_____ \$100.00 per person

Tee Sign Fee

_____ \$150.00

Souvenir Book Ads

_____ \$750.00 Full Page

_____ \$500.00 Half Page

_____ \$300.00 Quarter Page

_____ \$150.00 Business Card

All Ads should be “camera ready” in JPEG, PDF or Microsoft Word Format. Additional layout work, scanning and typesetting add \$15.00. All Ads are due by **April 20, 2020**. Ads can be sent by email to Essie Knowles at esmeraldaknowles@bellsouth.net

Exhibitor (May 22-24, 2020)

_____ \$1,000.00 (Includes one ticket per meal function, hospitality & Fish Fry.)

AAGHOF & AAC&YGHOF Golf Shirts available | Men’s/Ladies

_____ \$35.00 Sizes Small – XLG (indicate size, gender and type)

_____ \$40.00 Size 2XLG

Sponsorship Levels (Custom made sponsorships are available upon request!)

_____ \$1,250.00 | Award Sponsor

_____ \$1,750.00 | Clinic Sponsor

_____ \$2,500.00 | Founder fish Fry Sponsor

_____ \$3,000.00 | Collegiate Sponsor

_____ \$5,000.00 | ICYG Year Round Program Sponsor

_____ \$10,000.00 | Inner City Youth Golfers’, Inc. Learning Center & Museum Sponsor

_____ \$25,000.00 | Title Sponsor

One ticket Per Person to the following events

- Welcome Reception
- Legends Golf Tournament (Two Person Team scramble)
- Fish Fry
- ICYG Golf Clinic
- Hospitality (Four days)
- Workshops
- AAGHOF/AAC&YGHOF Reception, Auction, Awards, Dinner, Induction & Celebration



**Please return this form with payment to: African American Golfers Hall of Fame, Inc. (AAGHOF)
P.O. Box 10572, Riviera Beach, FL 33419**

VERY IMPORTANT:

1. Host Hotel sleeping rooms have been reserved at The Holiday Inn Express Hotel & Suites, 2485 Metrocentre Boulevard, West Palm Beach, Florida. To make your reservation call (561) 472-7020 and ask for the African American Golfers Hall of Fame group rate or mention code AAG to receive the group rate. The room rate is \$99.00 plus tax. Your reservation must be made by May 7, 2020, 12:00AM for you to receive your Special Room Rate.
2. Holiday Inn Room & Cancellation policy: 14 Day cancel notice to avoid penalty of one night room & Tax. All rooms must be guaranteed by a credit card.
3. **DON'T FORGET: ALL** of the above sponsorships and fees, unless otherwise specified, should be paid by or before April 20, 2020.
4. Make all checks payable to African American Golfers Hall of Fame (AAGHOF) and mail to PO Box 10572, Riviera Beach, FL 33419. To pay online with a credit card, please visit www.africanamericangolfershalloffame.com. For further information please contact the AAGHOF at 561-844-8774 or email icyginc@aol.com.
5. AAGHOF Refund/cancellation policy: All cancellations must be in writing on or by May 7, 2020 to receive consideration for any refund(s). Administrative cost will be deducted from any refund consideration.
6. Proper dress required at all times. Local and committee golf rules apply.
7. Onsite purchases are discouraged - COMPLETELY!

➤ Total amount enclosed: _____

➤ I regret that I am unable to attend, but please accept my contribution of \$ _____.

➤ Please designate my gift as coming from: _____.

Golf Tournament Entry Form

Legend Golf Tournament (Two Person Team scramble)

(1) Name:
Email:
(2) Name:
Email:



*I will participate in the
ICYG Golf Clinic @ Bear Lakes Country Club
1901 Village Boulevard, West Palm Beach, FL
Saturday, May 23, 2020*

Name:
Email:
Name:
Email:

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P.O. Box 10572, Riviera Beach, FL 33419***