



KAPPA ALPHA PSI
• FRATERNITY, INC. •

47th Annual Dr. Thomas D. Carter, Jr. Memorial Golf Tournament

SPONSORSHIPS

Benefitting the Kappa Community Service Foundation, Inc., a 501(c)(3) org



TopGolf El Paso
365 Vin Rambla Dr
El Paso, TX 79912
(915) 845-9028

- Game play
 - Buffet Luncheon during play
- NOTE: Vegetarian buffet lunch only available with early notification**

- Awards and Prizes:
- 1st, 2nd, & 3rd place Awards
 - Hole-In-One (played from specified bay for additional \$10/attempt)
 - Raffle

Saturday, August 26, 2023

TopGolf El Paso

Game: TopContender Team

Check-in starts: 10:45AM Shotgun start: 11:20AM

On time player entry fee includes Tournament play and lunch buffet. **We must receive your sponsor registration by August 9, 2023. Late/at event registration will not be able to access the buffet.**

Mulligans are available for sale at registration for \$5.00. Maximum six (6) per team

The Dr. Thomas D. Carter, Jr. Memorial Golf Tournament is the major fundraiser for the Kappa Community Service Foundation, Inc. (KCSF). All monies raised by the KCSF supports our scholarships to graduating high school males in the El Paso, Las Cruces/Alamogordo area and our two mentoring programs—Guide Right and Kappa League. The KCSF is a 501(c)(3) organization.

Please send your registration form and make your check payable to:

Kappa Community Service Foundation, Inc

ATTN: Golf Tournament

P. O. Box 370305

El Paso, TX 79937

You can also send payment via CashApp: **\$KCSF98** (provide reason in notes)

For more information, call Jeff Brown at (915) 240-4965 or email Golf@EPLCKAPPA.ORG

PLAYER REGISTRATION INFO FOR SPONSORS

Topgolf Sponsor: \$900 (6 players): _____

Food Sponsor: \$700 (6 players): _____

Tournament Sponsor: \$800 (6 players): _____

Sign Sponsor: \$600 (6 players): _____

Hole-In-One Sponsor: \$800 (6 players): _____

Bay Sponsor: \$100/bay: _____

Team Name: _____

Player 1: _____

Player 4: _____

Player 2: _____

Player 5: _____

Player 3: _____

Player 6: _____

****Please let us know if you require a vegetarian meal by checking the box after the player's name**

Point of Contact: _____ E-mail: _____

Phone: () _____ Address: _____

City/State: _____ Zip: _____