

**Southern Gospel Music Association Hall of Fame & Museum (SGMA)**  
**2024 Golf Tournament Benefit**

Date: \_\_\_\_\_



## ***Fundraiser Sponsorship & Player Form***

\_\_\_\_\_ **Gold Sponsor \$2500 – Banner & 4 Teams**

\_\_\_\_\_ **Silver Sponsor \$1000 – Large Sign & 2 Teams**

\_\_\_\_\_ **Bronze Sponsor \$250 – Hole Sign**

\_\_\_\_\_ **Individual Player Fee - \$100**

\_\_\_\_\_ **Team Players Fee - \$200 = 2 players**

Company Name: \_\_\_\_\_ Contact Name: \_\_\_\_\_

Company Sponsor; briefly describe what you would like on your sign: \_\_\_\_\_

**Player 1 or Company Sponsor Name:** \_\_\_\_\_

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

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Email Address: \_\_\_\_\_ Contact Phone #: \_\_\_\_\_

**Player 2 Name:** \_\_\_\_\_

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

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Email Address: \_\_\_\_\_ Contact Phone #: \_\_\_\_\_

### **Payment Information**

Mail Check & this form to:  
SGMA  
PO Box 6729  
Sevierville, TN 37864

Charge My Credit Card & Mail form:  
Name on Card: \_\_\_\_\_

Card Number: \_\_\_\_\_

Questions:  
director@sgma.org

Expiration: \_\_\_\_\_ CVV \_\_\_\_\_ Billing Zip: \_\_\_\_\_

Billing Contact Phone: \_\_\_\_\_

**Pay Online at**  
<https://sgma.org/>

Billing Email Address: \_\_\_\_\_