



April 12, 2021

with



Supporting the



Colon Cancer Prevention Project



ABOUT THE COLON CANCER PREVENTION PROJECT

The mission of the Colon Cancer Prevention Project is to eliminate preventable death and suffering from colon cancer. Colon Cancer is the 2nd leading cause of cancer death in the US and is preventable with on time screening. We are a Louisville based non-profit that has worked to increase the colon cancer screening rates in Kentucky from 33% when we began in 2004 to over 70% today.

THE COLON ONE GOLF SCRAMBLE

The Colon One Golf Scramble will have about 75 participants, including colon cancer survivors, physicians, and other supporters. All funds raised through the event will be used for colon cancer prevention education, advocacy, health systems improvement and survivor support.

Each golfer will receive:

- Greens and cart fees
- Lunch provided by Texas Roadhouse
- Beverages while you play
- Dinner

Sponsorship Opportunities

Mulligan Sponsor: \$1,200 (one available)

- One foursome
- Provide company sign at check in and mention during purchasing of mulligans *everyone buys mulligans*

Dinner Sponsor: (one available)

- One foursome
- Provide company sign at dinner in and mention during the awards
- Your company will provide dinner for about 75 players

Premium Hole Sponsor: \$1,000 (Hole sponsor + foursome)

- One foursome
- Hole sponsor sign provided

Hole Sponsor: \$300

- Company name or logo listed on signage at hole of choice (sponsor must provide high-res logo vector png)
- The opportunity to have promotional items for all participants
- Company logo on event website

Foursome \$700 OR Individual Player \$175

Sign up here:

[April Golf Shamble \(coloncancerpreventionproject.org\)](http://April Golf Shamble (coloncancerpreventionproject.org))

Sponsorship Commitment Form

Contact

Name of Individual or Organization

Name of Contact Person

Address

Phone

Email

Website

Your Contribution is tax deductible.

Our Tax ID is 20-1510713.

If paying with check, please mail to:

Colon Cancer Prevention Project

c/o Amanda Smart

P.O. Box 4039

Louisville, KY 40204

If paying by credit card:

Card Holder:

CC Number:

Expiration Date:

CVV Number:

Address (if different than above):

Amount:

Signature:
