



**Space is Limited!  
Register Today**



# 37<sup>th</sup> Annual Golf and Bocce Tournament

*In memory of Gene and Laura Pessagno*

**Thursday, May 2, 2024**

**Club at Castlewood** / Members Only Golf Course in Pleasanton

This Annual Golf and Bocce Tournament offers the perfect opportunity to showcase your commitment to Washington Hospital, while networking with business leaders and community members from the entire region. **Your gift will help us meet the rising patient demand for critical and lifesaving surgical procedures by funding state-of-the-art surgical equipment and technology for Washington Hospital’s Operating Rooms and future Trauma Center.**

**As part of our Hospital family, you are receiving this invitation to participate.** The golf tournament will be held on the prestigious Hill Course for a total of 120 golfers. **Registration is on a first-paid basis.**

- 9:00 a.m. Golfer Registration
- 10:30 a.m. Shotgun start
- 11:00 a.m. – 1:00 p.m. BBQ Lunch on course
- 10:30 a.m. – 4:00 p.m. On-course refreshments and gaming holes
- 4:00 p.m. – 5:00 p.m. Cocktail reception, awards, raffle and option to bid on a Pebble Beach golf getaway!  
Opportunity to meet members of the Washington Hospital Executive Team

## **PLATINUM SPONSOR \$10,000**

- Two Foursomes and four additional invitations to the cocktail reception
- Organization name or logo featured on golfer gift and two tee signs on course
- Two \$100 gift cards for the Club at Castlewood Pro Shop
- Opportunity to display corporate banner at event and to distribute promotional items during registration
- Recognition in Washington Hospital’s Annual Report (mailed to over 100,000 community members)
- Digital recognition on display at Washington West and on Hospital website
- Major tournament recognition from Hospital leadership at cocktail reception
- Recognition in pre- and post-event news articles, social media (10,000 followers) and Foundation newsletter
- Listing and link of your website on our event page
- Two reserved tables at cocktail reception
- **UPGRADE OPPORTUNITY** - For an additional gift of \$500, your company name will be displayed on our roving golf cart driven by our course managers throughout the tournament.

## **GOLD SPONSOR \$5,000**

- One Foursome and two additional invitations to the cocktail reception
- Organization name or logo featured on one tee sign on course
- One \$50 gift card for the Club at Castlewood Pro Shop
- Opportunity to distribute promotional materials during registration
- Recognition in Washington Hospital’s Annual Report (mailed to over 100,000 community members)
- Digital recognition on display at Washington West and on Hospital website
- Tournament recognition from Hospital leadership at cocktail reception
- Recognition in pre- and post-event news articles, social media (10,000 followers) and Foundation newsletter
- Listing and link of your website on our event page
- Reserved table at cocktail reception
- **UPGRADE OPPORTUNITY** - For an additional gift of \$500, your company name will be displayed on our roving golf cart driven by our course managers throughout the tournament.

**SILVER SPONSOR****\$3,500**

- One Foursome and one additional invitation to the cocktail reception
- Organization name or logo featured on tee sign on course
- One \$25 gift card for the Club at Castlewood Pro Shop
- Digital recognition on display at Washington West and Hospital website
- Tournament recognition and in pre- and post-event news articles, social media and Foundation newsletter
- **UPGRADE OPPORTUNITY** - For an additional gift of \$500, your company name will be displayed on our roving golf cart driven by our course managers throughout the tournament.

**HOLE SPONSOR****\$2,500**

- Two Golfers
- Organization or logo featured on tee sign at the tee box
- One \$25 gift card for the Club at Castlewood Pro Shop
- Digital recognition on display at Washington West and Hospital website
- Tournament recognition and in pre- and post-event news articles, social media and Foundation newsletter
- **UPGRADE OPPORTUNITY** - For an additional gift of \$500, your company name will be displayed on our roving golf cart driven by our course managers throughout the tournament.

~~**FOURSOME**~~ ~~**\$1600\***~~ **SOLD OUT!!**

- One Foursome
- Each entry includes green fee, golf cart, BBQ lunch, course beverages, and post-tournament cocktail reception
- **UPGRADE OPPORTUNITY** - For an additional gift of \$500, your company name will be displayed on our roving golf cart driven by our course managers throughout the tournament.

\* Limited availability. One foursome per organization

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**BOCCE TOURNAMENT****Another way to support Washington Hospital!**

Enjoy Castlewood's beautiful and private bocce courts for an afternoon of fun with friends or colleagues!  
Individual play or groups welcome.

**BOCCE PARTICIPANT** **\$150**

- Unlimited access to private bocce courts from 1:00 p.m. – 4:00 p.m.
  - Registration begins at 12:30 p.m.
  - Bocce Manager available on the courts
- Boxed Lunch
- Two Drink Tickets
- Post-Tournament Cocktail Reception





# YES! I want to support the 37<sup>th</sup> Annual Golf and Bocce Tournament

Please complete form below or visit [www.whhs.com/golf](http://www.whhs.com/golf) to register online or scan here:



ORGANIZATION \_\_\_\_\_ PHONE \_\_\_\_\_

CONTACT NAME \_\_\_\_\_ EMAIL \_\_\_\_\_

ADDRESS/CITY/ZIP \_\_\_\_\_

**SPONSOR LEVELS:**

- \$10,000 PLATINUM
- \$5,000 GOLD
- \$3,500 SILVER
- \$2,500 HOLE SPONSOR
- ~~\$1,600 FOURSOME~~ \*SOLD OUT
- Plus \$500 Upgrade Opportunity

\*Limited availability. One foursome per organization

**OTHER:**

- Bocce Tournament Participant - \$150     Request vegetarian boxed lunch
- Additional Cocktail Reception Guest - \$50 x \_\_\_\_\_
- Mulligan Package(s) \$50 x \_\_\_\_\_ (also available at registration)  
Package includes entry to the putting contest, two mulligans and one extra putt
- I would like to make a donation in support of the Surgical Services Fund \$ \_\_\_\_\_

**TOTAL:** \$ \_\_\_\_\_

**PAYMENTS ACCEPTED:**  Check  Visa  MasterCard  American Express  Send Invoice

**CREDIT CARD #** \_\_\_\_\_ **Exp. Date** \_\_\_\_\_

**CARDHOLDER SIGNATURE** \_\_\_\_\_

**Please make checks payable to Washington Hospital Healthcare Foundation or WHHF**  
**This form can be emailed to [foundation@whhs.com](mailto:foundation@whhs.com) or mailed to 2000 Mowry Ave., Fremont, CA 94538.**  
**For additional information, contact (510) 818-7350 / [foundation@whhs.com](mailto:foundation@whhs.com)**

- Golfer names provided below     I will email names by April 12

Name:	(M/F)	Email:
Name:	(M/F)	Email:
Name:	(M/F)	Email:
Name:	(M/F)	Email: