



California Society *for*
Healthcare Engineering, Inc.



2nd Annual Inland Empire

GOLF TOURNAMENT

October 10, 2017

Hidden Valley Golf Club

10 Clubhouse Drive, Norco, CA 92860



2nd Annual Inland Empire

GOLF TOURNAMENT

Tournament Information

TIME & PLACE

Hidden Valley Golf Club
10 Clubhouse Drive
Norco, CA 92860

9:00 AM — Registration and Box Lunch

10:00 AM — Shotgun Start

FEES & FORMAT

\$150 per player
\$600 per foursome

(Includes boxed lunch, green fee, dinner, and one door prize ticket.)

CONTESTS

- Longest Drive
- Putting Green
- Closest to the Pin

QUESTIONS

If you have any questions, contact Matthew Bond at mjb3@redlandshospital.org, or the CSHE office at jjones@calhospital.org.

NOTES

Participants must observe the following rules:
1) soft spike golf shoes only are allowed on the golf course; and 2) observe dress code: must have collared shirts (polo, etc.) and no denim jeans, slacks or shorts.

DOOR PRIZES

No raffle tickets will be sold. Door prizes are encouraged and all tournament participants will have an equal opportunity to win.

REGISTRATION

Complete registration form and forward payment (Visa, MasterCard & AMEX) to jjones@calhospital.org. You may also register online at <http://cshe.org/Events/GolfTournaments.aspx>.

Please note that online registrations will receive priority to those received by other means (email, mail, fax).

Make checks payable to CSHE, Attn: Joyce Jones
1215 K Street, Suite 800, Sacramento, CA 95814

OPEN TO ALL

All CSHE sanctioned events are open to all CSHE members, including facility, affiliate, retired and student. The cost to attend the event shall be set for each class of membership. Pricing may vary between each class of membership.

CANCELLATION

Cancellations must be in writing and faxed to (916) 552-7617 or emailed to jjones@calhospital.org prior to September 26, 2017. A \$45 non-refundable processing fee will be charged.

Cancellations and non-attending registrants after September 26 will be responsible for the full registration fee. Substitutions are encouraged.

WAITING LIST

When an event has reached the approved capacity, no more registrations can be accepted. However, a waiting list will be established on a first-come-first-served basis. Preference will be given to facility members first, and then affiliates.



MORE INFORMATION

Matthew Bond | mjb2@redlandshospital.org

Joyce Jones | jjones@calhospital.org | (916) 552-7639



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Sponsorship Opportunities

MASTER SPONSOR

1 available

\$2,000

- Signage at Tournament, including Banner and Tee sign
- Foursome in Tournament
- Option for Sponsor Table at Hole
- Special Recognition at Shotgun Start and Banquet
- Recognition in Tournament Program

FOOD SPONSOR

2 available

\$1,000

- Signage at Tournament
- Recognition at Banquet
- Recognition in Tournament Program

TABLE/HOLE SPONSOR - WITH ALCOHOL

4 available

\$500

- Table with Signage and Company Logo at One of the Holes
- Recognition in Tournament Program
- Ability to serve alcohol. Sponsor supplies alcohol, which must be bought from the course. Alcohol arrangements should be made with Jordan McDonald, at Hidden Valley Golf Club, 951-737-1010 or Jordan@HiddenValleyGolf.com.
- Course will provide table, chair and ice

TABLE/HOLE SPONSOR

12 available

\$400

- Table with Signage and Company Logo at One of the Holes
- Recognition in Tournament Program
- Not able to serve alcohol
- Will need to bring your own table, chair and canopy (if desired)

GOLF CART SPONSOR

1 available

\$400

- Signage with Company Logo in all Golf Carts
- Recognition in Tournament Program

TEE SPONSOR

18 available

\$250

- Tee Sign and Recognition in Tournament Program

PUTTING GREEN SPONSOR

1 available

\$500

- Recognition in Tournament Program

LONGEST DRIVE SPONSOR

1 available

\$250

- Recognition in Tournament Program

CLOSEST TO THE PIN SPONSOR

1 available

\$250

- Recognition in Tournament Program



MORE INFORMATION

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Registration & Sponsorship

✓ Yes, I want to participate!

Full Name:

Company:

Cell Phone:

Email:

✓ Yes, I want to sponsor the tournament!

Please list your company name as it will be displayed on signage. Email your logo to jjones@calhospital.org.

Please note that online registrations will receive priority to those received by other means (email, mail, fax). To request or confirm availability for these sponsorship opportunities please contact Joyce Jones at jjones@calhospital.org.

Sponsorship Name:

Master Sponsor (1 maximum)— \$2,000

Food Sponsor (2) — \$1,000

Table/Hole Sponsors (4 w/alcohol) — \$500

Table/Hole Sponsor (12) — \$400

Golf Cart Sponsorship — \$400

Putting Green Sponsor — \$500

Longest Drive Sponsor — \$250

Closest to the Pin Sponsor — \$250

Tee Sponsors (18) — \$250

✓ Yes, I want to register to golf!

\$150 per player or \$600 per foursome.

Golfer #1:

Company:

Cell Phone:

Email:

Golfer #2:

Company:

Cell Phone:

Email:

Golfer #3:

Company:

Cell Phone:

Email:

Golfer #4:

Company:

Cell Phone:

Email:

You may also register online at <http://cshe.org/Events/GolfTournaments.aspx>.

Make checks payable to CSHE and send, along with completed registration form, to: CSHE, Attn: Joyce Jones, 1215 K Street, Suite 800, Sacramento, CA 95814. For credit cards, please provide the following information and email to jjones@calhospital.org.

VISA

MasterCard

AMEX

Email Receipt Required?

Email:

Credit Card Number:

3-Digit Code / 4-Digit Code for AMEX

Expiration Date:

Zip Code:

Amount Authorized: \$.00

Event Code: IEGOLF-17