MISSION STATEMENT
The Special Operations Warrior Foundation’s enduring promise to America’s Army, Navy, Air Force, and Marine Corps Special Operations personnel is to:

(1) Ensure full financial assistance for post-secondary education from an accredited two or four-year college, university, technical or trade school, as well as educational counseling, preschool grants, and tutoring to the surviving children of Special Operations personnel who lose their lives in the line-of-duty and,

(2) Provide immediate financial grants to severely combat-wounded and hospitalized Special Operations personnel and their families.

TOURNAMENT AGENDA

Friday, June 5th, 2020

**Arrival**
Golf Bag Drop Off ................................................................. Drop off area

**8:30 a.m.**
Registration/Review Silent Auction Items......................... Clubhouse
Driving Range, Putting Green & Bunker Practice.................. Practice Area
Continental Breakfast w BFST blend Liquors......................... Clubhouse

**10:25 p.m.**
Opening Ceremonies/Flyover/Color Guard/Tournament Instructions & Rules... Golf Course

**11:00 a.m.**
Shotgun Start .................................................................................. Golf Course

**3:30 p.m.**
Tournament Results/Golf Dinner/Bourbon/Wine/Beer/Cigars
Live and Silent Auction
Guest Speakers ................................................................. Clubhouse

**General Information**
Place: Achasta Golf Club, 639 Birch River Drive, Dahlonega, GA 30533, 706-867-7900
Dress: SOFT Spikes or Tennis Shoes Only - NO JEANS
Format: Scramble

**Other Competitions:** Closest to the Pin, Longest Drive, Hole-In-One Prize x 4 & Par 3 Poker
Yes, I would like to participate as a Sponsor (Please place an “X” next to your selected level/category)

<table>
<thead>
<tr>
<th>Sponsorship Description</th>
<th>Accepted by:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Warrior Level (2 teams, 4 Pin hole flags, Tee Sponsor &amp; Products)</td>
<td>$5,000.00</td>
</tr>
<tr>
<td>Patriot Level (1 team, 4 Pin hole flags, Tee Sponsor &amp; Products)</td>
<td>$2,000.00</td>
</tr>
<tr>
<td>Spartan Level (1 Foursome)</td>
<td>$1200.00</td>
</tr>
<tr>
<td>Sponsor a “Warrior to Play” giving $300 (10 are needed)</td>
<td></td>
</tr>
<tr>
<td>Individual Player</td>
<td>$300.00</td>
</tr>
<tr>
<td>Buy a hole “Flag” giving $500 (flag will be your gift after the tournament)</td>
<td></td>
</tr>
<tr>
<td>Sponsor a “Tee” giving $300 (Corporate, Individual, In Memory or Honor of)</td>
<td></td>
</tr>
<tr>
<td>Auction Items/Silent and Live</td>
<td></td>
</tr>
<tr>
<td>IN-KIND DONATIONS (Raffle Prizes / or $100 Quantity Give-a-way gifts)</td>
<td></td>
</tr>
</tbody>
</table>

IMPORTANT: In addition to listing your level of support, PLEASE email a (LARGE) jpeg image of your company’s logo to Kellyjack Luman at AchastaVeterans@outlook.com to have it included in the program.

Contact Name ________________________________ Title ________________________________
Company __________________________________________________________________________
Phone__________________ Fax _______________ E-Mail______________________________
Address:_________________________________________________________________________
City:_________________________ _____ State: _____________________ Zip: ________________

Please fill out and email this form as soon as possible to: achastaveterans@outlook.com
or go to website: achastaveteransassociation.com
For questions, call Kellyjack Luman at 678-458-5395
SPECIAL OPERATIONS WARRIOR FOUNDATION
GOLF CLASSIC XI

Date: Friday, June 5th, 2020
Time: Registration – 8:30 A.M.
Shotgun Start – 11:00 P.M
Scramble Format

Location: 639 Birch River Drive
Dahlonega, GA 30533

PAYMENT
O Check Enclosed for Individual $300  O Check Enclosed for Sponsors/ Foursomes
O Credit Card Information:

Type: AX___ Visa___ MC ___

Card # _____________________ (Security Code)

Expiration Date: _____________

Name:_______________________________________ (As appears on Credit Card)

Signature _____________________________

Contact Name:____________________________

Phone: _____________________  E-mail: _________________________________

Street Address: __________________________________

City:______________________ State:______________ Zip:______________

SINGLE  Name

FOURSOME  HANDICAP

Player (1)

Player (2)

Player (3)

Player (4)

Complete form and MAIL TO/DROP OFF at ACHASTA GOLF CLUB PRO SHOP payable to
Achasta Veterans Association 639 Birch River Drive Dahlonega GA 30533
or Go to achastaveteransassociation.com