



THE  
WYNN  
HOSPITAL  
CLASSIC

2022

Bank of America presents The Wynn Hospital Classic. This annual event reflects the exciting future of healthcare in our community. We invite you to join us at the Yahnundasis Golf Club on **Monday, August 29, 2022**, for an exciting and memorable day of golf. Proceeds will benefit the Mohawk Valley Health System Foundation.

We will celebrate the conclusion of our day of golf with a cocktail reception featuring delicious and substantial hors d'oeuvres, to be enjoyed with an open bar.

**Social Sponsorship - \$5,000**

- Signage recognition during the cocktail hour
- Recognition during the program and on the entrance sign
- One tee sign on the course
- Field of four players (one team) in the Golf Outing - includes lunch for each player
- Golfer gift for each player (four)
- First choice of am/pm tee times

**Putting Contest Sponsorship - \$4,000**

- Signage recognition at the putting green
- One tee sign on course, recognition during the program and on the entrance sign
- Field of four players (one team) in the Golf Outing - includes lunch for each player
- Golfer gift for each player (four)
- First choice of am/pm tee times

**Lunch Sponsorship - \$3,000**

- Signage recognition during lunch, recognition during the program, on the entrance sign and one tee sign on the course
- Field of four players (one team) in the Golf Outing - includes lunch for each player
- Golfer gift for each player (four)

**Hole Sponsorship - \$2,500**

- One tee sign on course and recognition during the program
- Field of four players (one team) in the Golf Outing - includes lunch for each player
- Golfer gift for each player (four)

**Please contact us by Friday, August 5, 2022.**

For information on playing in the event, please contact Michele Adams, at **315-624-5606** or **madams@mvhealthsystem.org**.

**Please fax completed form to 315-624-5737, email madams@mvhealthsystem.org or mail to:**

Mohawk Valley Health System Foundation  
1676 Sunset Ave, Utica, NY 13502

Tee times will be assigned on a first come, first served basis.

\_\_\_\_\_  
Company Name

\_\_\_\_\_  
Contact Person

\_\_\_\_\_  
Address

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

\_\_\_\_\_  
Phone Number

\_\_\_\_\_  
Email Address

\_\_\_\_\_  
Print your name or company name as you want it to appear on your tee sign.

**Enclosed is my check payable to:**

MVHS Foundation

**Please charge to my:**

MasterCard  Visa  Discover  American Express

Card # \_\_\_\_\_

Expiration Date \_\_\_\_\_

CV Code (3 digits on back of credit card) \_\_\_\_\_