Ronald McDonald House® Marshfield

6TH ANNUAL

A ROUND FOR THE HOUSE GOLF SCRAMBLE

FRIDAY SEPT. 11 2026

RIVEREDGE GOLF COURSE MARSHFIELD





SPONSORSHIP OPPORTUNITIES

PRESENTING SPONSOR - $10,000

- 3 teams (12 golfers)
- Exclusive recognition as presenting sponsor.
- Prominent recognition on all materials, signage and media.
- Dedicated advertising highlighting your sponsorship and logo.
- Recognition at the RiverShoot contest.
- On-course contest opportunity.

MASTERS SPONSOR - $5,000

- 2 teams (8 golfers)
- Prominent, exclusive recognition on all materials, signage and media.
- Exclusive recognition placed at the Impossible Putt contest.
- Exclusive recognition at a hole.

CART SPONSOR - $3,000

- 2 teams (8 golfers)
- Exclusive logo placement on each cart.
- Prominent logo recognition within golfer program.

LUNCH SPONSOR - $2,000

- 1 team (4 golfers)
- Exclusive signage located at lunch buffet.
- Prominent recognition within golfer program.

GOLFER WELCOME GIFT - $2,000

- 1 team (4 golfers)
- Logo featured on co-branded item for each golfer.
- Exclusive signage with gift distribution.
- Prominent recognition within golfer program.

FAMILY EXPERIENCE - $2,000

- 1 team (4 golfers)
- Exclusive signage located at Registration.
- Provide VIP treatment, meals, lodging and event t-shirts for the featured family.
- Prominent recognition within golfer program.

BEVERAGE SPONSOR - $1,500

- 1 team (4 golfers)
- Prominent signage on beverage carts and bar.
- Prominent recognition within golfer program.

SIGNATURE DRINK - $1,500

- 1 team (4 golfers)
- Exclusive signage at signature drink station and opportunity to be on the course.
- Prominent recognition within golfer program.

ON-COURSE CONTEST (2) - $1,000

- 1 team (4 golfers)
- Prominent signage at one on-course contest.
- Opportunity for representatives to host contest.
- Recognition within golfer program.

HOLE SPONSOR (14) - $500

- 1 team (4 golfers)
- Prominent signage displayed at a hole.
- Recognition within golfer program.

KEEPING FAMILIES CLOSE - $250

- Signage displayed near clubhouse.
- Recognition within golfer program.

RAFFLE ITEM DONOR

- Recognition within golfer program and signage at item.

To discuss a customized opportunity or other ways to engage with RMHC, please contact Amanda Lancour at 715-213-1912 or amanda@rmhcofmarshfield.org.

A ROUND FOR THE HOUSE COMMITMENT FORM

Please complete and return to:
amanda@rmhcofmarshfield.org or mail to:
RMHC, 803 W North St, Marshfield, WI 54449
Contact us with any questions at 715-387-5899.

COMPANY, ORGANIZATION OR FAMILY

Name: _____

(As it should appear on recognition materials.)

Contact Name: _____

Email: _____

Phone: _____

Address: City, State, Zip: _____

COMMITMENT

Team Entry ($500/team):$_____

Sponsorship: $_____

Total Commitment: $_____

PAYMENT OPTIONS (select one)

- ☐ Check enclosed (made payable to RMHC)
- ☐ Credit card #: _____
  - Exp:_____ CVC:_____
  - Name: _____
  - Billing Address: _____
  - City, State, Zip: _____
- ☐ Invoice (address if different than contact listed):
  _____

NEXT STEPS

- ☐ Please use logo from last year.
- ☐ Will send high-res logo to:
  amanda@rmhcofmarshfield.org
- ☐ Website URL and social media handles:
  _____
  _____
  _____

SPONSORSHIP LEVEL SELECTION

- ☐ Presenting - $10,000
- ☐ Masters - $5,000
- ☐ Cart - $3,000
- ☐ Welcome Gift - $2,000
- ☐ Lunch - $2,000
- ☐ Family - $2,000
- ☐ Beverage - $1,500
- ☐ Signature Drink - $1,500
- ☐ On-Course Contest - $1,000
- ☐ Hole - $500
- ☐ Keeping Families Close - $250
- ☐ Item Donor (please provide description)

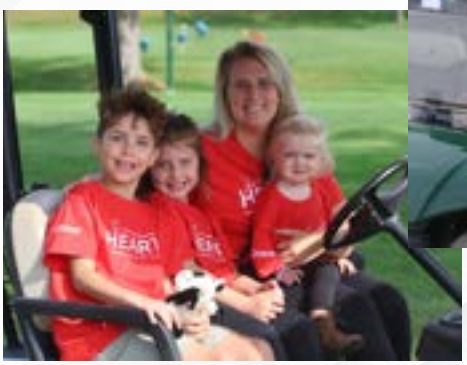
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  Value: $_____







THANK YOU for giving the gift of togetherness. *In accordance with IRS regulations, sponsorships and donations will be tax- deductible to the fullest extent allowable by law.* ***Tax ID: 93-0833012***

A ROUND FOR THE HOUSE GOLFER REGISTRATION

FRIDAY SEPT. 11 2026

RIVEREDGE GOLF COURSE MARSHFIELD
8:30 AM REGISTRATION
9:30 AM SHOTGUN START
4:00 PM RECEPTION
FOUR-PERSON TEAM SCRAMBLE

Golfer #1 (Primary team contact if needed): _____

Email: _____

Cell: _____

Golfer #2: _____

Email: _____

Cell: _____

Golfer #3: _____

Email: _____

Cell: _____

Golfer #4: _____

Email: _____

Cell: _____

PAYMENT INFORMATION

$500 PER TEAM

☐ Check enclosed (made payable to RMHC)

☐ Credit card #: _____

Exp:_____ CVC:_____

Name: _____

Billing Address: _____

City, State, Zip: _____

☐ Invoice (address if different than contact listed):

_____

FOLLOW TO REGISTER AND PAY ONLINE

THANK YOU

"Keeping Families Close" thanks to you. Questions? Contact us at 715-387-5899. Return to: amanda@rmhcofmarshfield.org or RMHC, 803 W North St, Marshfield, WI 54449