



Sponsorship



Tito Francona Memorial Golf Classic

Monday, August 3, 2026 ♦ Olde Stonewall Golf Club

MEMORIAL GOLF CLASSIC
Heritage Valley Health System Foundation

7:30 a.m. Registration/Breakfast ♦ 8:30 a.m. Tee-off ♦ Scramble format ♦ Reception at 1:30 p.m.

Proceeds benefit cancer and heart patients at Heritage Valley Beaver Hospital through the Tito and Birdie Francona Memorial Endowment Fund.

- \$10,000 SILVER SPONSOR**
- Two (2) foursomes at Olde Stonewall Golf Club (with carts, breakfast, lunch at the turn, and reception at Shakespeare’s Restaurant).
 - Two course/hole signs.
 - Recognition in all event promotional activities, Heritage Valley publications, and on the Heritage Valley Health System website.
 - Introduction at post-event reception.
 - Membership to Founders Society.

- \$5,000 HERITAGE SPONSOR**
- Two (2) foursomes at Olde Stonewall Golf Club (with carts, breakfast, lunch at the turn, and reception at Shakespeare’s Restaurant).
 - One course/hole sign.
 - Recognition in all event promotional activities, Heritage Valley publications, and on the Heritage Valley Health System website.
 - Membership to Founders Society.

- \$2,400 CORPORATE SPONSOR**
- Includes one (1) golf foursome (with carts, breakfast, lunch at the turn, and reception at Shakespeare’s Restaurant). Also includes corporate sponsor recognition at the event and in all Heritage Valley publications, as well as membership to Founders Society.

- \$600 INDIVIDUAL GOLFER**
- Includes golf (with cart, breakfast, lunch at the turn, and reception at Shakespeare’s Restaurant).

- \$2,500 Reception Sponsor**
- Two (2) tickets to the afternoon reception following golf; sponsor signage on course; recognition at the reception; and listing in program.

- \$1,500 Hole-in-One Sponsor**
- Hole-in-One Sponsor sign on course; listing in program.

- \$1,000 Driving Range Sponsor**
- Driving Range Sponsor sign on course; listing in program.

- \$500 Golf Cart Sponsor**
- Company logo digitally loaded to scroll all day on all golf carts; listing in program.

- \$250 Course Snacks Sponsor**
- Snack Sponsor sign on course; listing in program.

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Sponsor Registration

Please return by July 17, 2026



Contact Name: _____

Cell Phone # _____ Alt # _____

Email address: _____

Company Name: _____ Office ph # _____

Address: _____

Choose payment method:

Check ... Total amount enclosed: \$ _____

Make checks payable to: **Heritage Valley Health System Foundation** and mail to:
Kim Anastas, Heritage Valley Foundation, 420 Rouser Road, Suite 102, Moon Township, PA 15108.

Bill me ... Total amount to be invoiced: \$ _____

Charge my credit card ... MasterCard VISA DISC AMEX

Name on credit card: _____

Card #: _____ Security Code (CVV): _____

Expiration Date: _____

Foursome names *(if unknown, please submit form now and email names by July 17, 2026 to kanastas@hvhs.org)*

1. _____ 2. _____

3. _____ 4. _____

Foursome #2 names *(if applicable)*

1. _____ 2. _____

3. _____ 4. _____



Heritage Valley Foundation Contact Information:
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