



# 12<sup>th</sup> Annual Golf Classic

MONDAY, OCTOBER 21, 2024

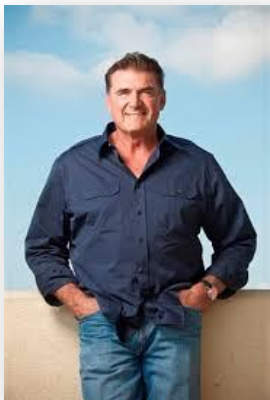
SHOTGUN START 12PM | CHECK IN 10:00AM

WHERE: RIVERBEND COUNTRY CLUB

1214 DULLES AVE, SUGAR LAND, TX 77478



Honoring Lance Berkman  
6-Time All-Star for the Astros  
Houston Astros Team MVP  
Astros Hall of Famer



Houston Oilers  
Quarterback  
Dan Pastorini



Houston Astros  
Baseball pitcher,  
manager, and  
broadcaster  
Larry Dierker



Welterweight World  
Title Contender  
Termit Watkins



RIVERBEND COUNTRY CLUB

Register & Donate  
Here:



## Four- Person Scramble

\$175 per player/\$700 per team

Hole sponsors, \$150 for one or 2 for \$250

More Sponsor Opportunities Available

Register online at [www.championskidscamp.org/golf](http://www.championskidscamp.org/golf) or

Return Completed Forms to Champions Kids Camp:

9711 S Mason Rd., Ste 125 #305, Houston, TX 77407



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Riverbend Country Club  
1214 Dulles Ave  
Sugar Land, TX 77478

Lunch and Dinner Provided  
Silent and Live Auctions

For More Information Contact:  
Chair, Doug Earle at [dougesltx@gmail.com](mailto:dougesltx@gmail.com)  
Co-chair, Kim Nash at  
[kimnash@championskidscamp.org](mailto:kimnash@championskidscamp.org) or  
Office #832-449-3743  
Jimmy Disch at 832-541-9047  
Jerry Lewis at 979-481-5670

Register online at  
[www.championskidscamp.org/golf](http://www.championskidscamp.org/golf)  
or fill out below and return to  
address provided on front.

## Sponsorship Options

- Team Sponsor (4 Players) \$700
- Single Player \$175
- Hole (\$150 for 1 or \$250 for 2)  
Company Name/Logo will be displayed at hole
- Cart Sponsor \$2,000  
Entry for two 4-person teams, one hole sponsor and signage on cart
- Presenting Sponsor \$3,500  
Entry for three 4-person teams, two Hole Sponsorships, Signage at Riverbend Country Club and Media Recognition
- Title Sponsor \$4,500  
Entry for four 4-person teams, three Hole Sponsorships, Signage on all CKC materials, Recognition at tournament and all CKC media sites

I cannot participate, but please accept my donation of \$ \_\_\_\_\_ check made payable to Champions Kids Camp

I cannot participate, but please charge my credit card & accept my donation of \$ \_\_\_\_\_.

Name/Company Name:

Address:

City: State: Zip Code:

Phone: Email: ( )

Please charge my credit card in the amount of \$ \_\_\_\_\_

Credit Card #: \_\_\_\_\_

Exp. \_\_\_/\_\_\_ CVV \_\_\_\_\_ Billing Zip Code \_\_\_\_\_

Name as it appears on card

Signature: