



SPONSOR & TEAM RESERVATION FORM
BullsBlast 2022

Event information available at www.philanthropy-partners.com.

Sponsor Level Requested:

Course Sponsor: (Sold Out)

_____ Green & Gold Sponsor: \$3,000 each - WAIT LIST ONLY

Game of Chance Sponsor (Sold Out)

Team Sponsor: (Sold Out)

Sponsor Company: _____

Sponsor Representative Name: _____

Email: _____ Phone: _____

To guarantee your reservation, please remit payment by check or credit card by returning this form by mail to the address below. If paying by Credit Card, complete the section below and return the form by email to bullsblast@philanthropy-partners.com. To be invoiced, return the form by mail or email and we will return an invoice.

_____ Payment by check enclosed. _____ Please send an invoice _____ Please charge my credit card:

Name on Credit Card _____ Phone: _____

AMEX/MC/Visa/Apple Pay# _____ Exp. _____ Sec Code _____

Cardholder email: _____ Billing address: _____

All credit card payments will be processed through the University of South Florida Foundation, Inc. who will provide tax receipts, once payment is processed. The amount of payment less the fair market value of goods and services received, may be tax deductible. Please consult your tax advisor.

Course Requested: Beginner: _____ Intermediate: _____ Advanced: _____

(NOTE: We will do our best to provide your choice but course placement not guaranteed)

1. Team Captain _____

Phone: _____ Email: _____

2. Team Member _____ Email: _____

3. Team Member _____ Email: _____

4. Team Member _____ Email: _____

Please indicate if you or your guests have any dietary restrictions: _____