

___Eagle Sponsor **\$3,500**

Four golfers, Sponsor signage, recognition plaque, recognition in tournament program and on site, dinner reservations for four.

___Long Drive Sponsor **\$3,000**

Four golfers, Sponsor signage, recognition in tournament program and on site, dinner reservations for four.

___Closest to the Pin Sponsor **\$3,000**

Four golfers, Sponsor signage, recognition in tournament program and on site, dinner reservations for four.

___Birdie Sponsor **\$2,500**

Four golfers, Sponsor signage, recognition in tournament program and on site, dinner reservations for four.

___Foursome **\$600**

___Individual Golfer **\$150**

 **Early Birds!**
Register by August 1st
Save \$25/per golfer


Contributions are tax deductible within legal limits.


The University's Tax ID number is 94-1156266


Questions: Please contact Sherry McGee


smcgee@pacific.edu or (209) 946-3116

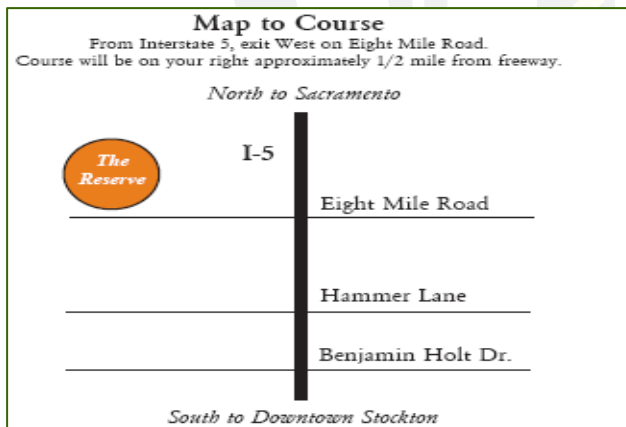
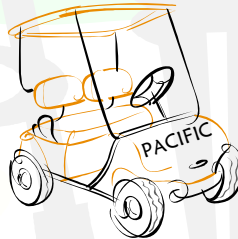
**Committee Members
2009**

 **AmerisourceBergen/Good Neighbor Pharmacy**
 David Collum, Wayne Ketchum, Marie McNutt, Mike Quick, Jeff Sharkey, and Robert Vera

 **Raleys**
 Bill Okuno '81, and Flint Pendergraft '81

 **Save-Mart**
 Erin Cabelera '98, Phil Smith '82, and Michele Snider '75

 **University of the Pacific**
Thomas J. Long School of Pharmacy & Health Sciences
 Steve Burdick, Nancy DeGuire '89, Sherry McGee '02, Mary Nakamura, Todd Davenport, Physical Therapy, and Carol Hirota, Speech-Language Pathology



Scholarship
Golf
 Classic

UNIVERSITY OF THE
PACIFIC
 Thomas J. Long School of
 Pharmacy & Health Sciences

**Invites you to our
 7th Annual Golf Classic**

***Speech-Language Pathology
 Student Scholarship Benefit***

Sunday, September 20, 2009

The Reserve at Spanos Park

6301 West Eight Mile Road

Stockton, CA 95219

Sponsored by:



Join us for the seventh Annual Pacific Scholarship Golf Classic!

This event continues to grow each year, and this year we are excited to be a part of this tournament as we raise money to benefit Speech-Language Pathology students. Join us in providing opportunities for future Speech-Language Pathologists to pursue their education.



7th Annual Golf Classic
Schedule of Events
Sunday, September 20, 2009

- 9:00 a.m.** Registration Open
- 9:30 - 10:45 a.m.** Golfing Skills Clinic
- 11:00 a.m.** Shotgun Start
Format: Four-person Best Ball
On course: Box Lunch
- 4:00 - 5:00 p.m.** Cocktails
Wine Tasting
- 5:00 p.m.** Awards Dinner
Raffle Drawings



Golf Classic Registration



- Event Sponsor: please see sponsor panel
- Foursome Individual Golfer

Contact Name: _____ Company Name: _____

Name on Credit Card: _____ Credit Card Number: _____ Exp. Date: _____ VPN code: _____

Billing address of Credit Card Holder: _____

Bus. Phone: _____ Fax: _____ E-mail: _____

\$ _____ Check Total (Please make checks payable to University of the Pacific) OR Please charge \$ _____ to my _____ Visa _____ MC _____ AmEx (check one)

Please reserve a place for a _____ **Golfing Foursome** - \$600 / Early bird foursome \$500 (Before 8/1) or **Individual Golfer** \$150 / Early Bird golfer \$125 (Before 8/1)

Please list all players' information on the right panel and Sponsorship information on back panel .

Mail or fax entry form to: Thomas J. Long School of Pharmacy and Health Sciences, Student Benefit: Speech-Language Pathology Physical Therapy

Attn: Sherry McGee, University of the Pacific, 3601 Pacific Avenue, Stockton, CA 95211 -or- fax (209) 946-2410

Golfer #1 **Yes, I will attend the dinner**

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

E-mail address: _____

Phone Number: _____

Golfer #2 **Yes, I will attend the dinner**

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

E-mail address: _____

Phone Number: _____

Golfer #3 **Yes, I will attend the dinner**

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

E-mail address: _____

Phone Number: _____

Golfer #4 **Yes, I will attend the dinner**

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

E-mail address: _____

Phone Number: _____