



**T E X A S
D I S T R I C T A N D
C O U N T Y
A T T O R N E Y S
F O U N D A T I O N**

A portion of the proceeds benefit the Texas District and County Attorneys Foundation
Golf Tournament—September 22, 2010

TDCAF Golf Tournament Sponsor and Exhibitor Contract

- Title Sponsor—\$10,000 +**
 Official Title Sponsor Status
 Most Prominent Recognition on Tee-Off Signage
 Opportunity to Insert Product in Souvenir Packs
 Top Priority Recognition in *The Texas Prosecutor* and TDCAF website
 Registration for 8 golfers (includes green fee, cart, and range balls)
 Dinner for 4 at Opening Reception
 Exhibitor Space
- Family Sponsor—\$1,500 +**
 Recognition in Tee-Off Signage
 Recognition in *The Texas Prosecutor* and TDCAF website
 Registration for 2 golfers (includes green fee, cart, and range balls)
 Dinner for 1 at Opening Reception
 Exhibitor Space
- Corporate Sponsor—\$3,500 +**
 Premier Recognition on Tee-Off Signage
 Opportunity to Insert Product in Souvenir Packs
 Recognition in *The Texas Prosecutor* and TDCAF website
 Registration for 6 golfers (includes green fee, cart, and range balls)
 Dinner for 3 at Opening Reception
 Exhibitor Space
- Friend Sponsor—\$1,000 +**
 Recognition in Tee-Off Signage
 Recognition in *The Texas Prosecutor* and TDCAF website
 Registration for 1 golfer (includes green fee, cart, and range balls)
 Exhibitor Space
- Champion Sponsor—\$2,500 +**
 Recognition on Tee-Off Signage
 Opportunity to Insert Product in Souvenir Packs
 Recognition in *The Texas Prosecutor* and TDCAF website
 Registration for 4 golfers (includes green fee, cart, and range balls)
 Dinner for 2 at Opening Reception
 Exhibitor Space
- Sponsorship level \$ _____
- In lieu of underwriting this year, I/we would like to make a donation of \$ _____

* TOTAL ENCLOSED/TO BE CHARGED \$ _____

Name of Company or Individual* _____

Address _____

City, State, ZIP _____ Telephone _____

E-Mail _____ Fax _____

*Correct listing for recognition, if different from above _____

Please make check payable to the Texas District and County Attorneys Foundation (TDCAF) or you may charge to:

Mastercard Discover Visa AMEX Card # _____ Security Code (____) Expires _____

Signature

Printed Name

Date

Please return via email to vitera@tdcaa.com, mail or fax to:
 505 W. 12th St, Suite 100
 Austin, TX 78701
 Fax: (512) 478-4112