



**33<sup>rd</sup> ANNUAL**  
**HARRY WICKERSHAM GOLF TOURNAMENT**  
**TITLE SPONSOR**



**JAMES AVERY**  
**Forging Hope**

**July 30, 2026**

**Benefitting Texas Lions Camp**  
**CORPORATE SPONSORSHIP**  
**REGISTRATION**

\_\_\_\_ Yes, I (We) want to be included as a SPONSOR in the Golf Tournament benefiting TEXAS LIONS CAMP and hosted by the Fredericksburg Lions Club at Lady Bird Johnson Golf Course in Fredericksburg, Texas. Benefits correspond to sponsorship/gift level outlined on attached form.

**Please indicate level of sponsorship:**

- \_\_\_\_ Title Sponsor (\$25,000) **SOLD!**
- \_\_\_\_ Diamond Sponsor (\$5,000)
- \_\_\_\_ Emerald Sponsor (\$3,000)
- \_\_\_\_ Platinum Sponsor (\$1,000)
- \_\_\_\_ Gold Sponsor (\$500)
- \_\_\_\_ Contributor \_\_\_\_\_
- \_\_\_\_ In-Kind Donor\* \_\_\_\_\_

\*Please specify dollar value of item donated

**If applicable, please Complete Team Information on reverse side!**

(SPONSOR) Contact Name: \_\_\_\_\_

Business: \_\_\_\_\_

Lions Club: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ Phone: \_\_\_\_\_

E-Mail: \_\_\_\_\_

**HOW NAME/BUSINESS SHOULD APPEAR IN PUBLICITY/RECOGNITION:**

\_\_\_\_\_

**PLEASE MAKE CHECKS PAYABLE TO: Texas Lions Camp, Inc.**

Amount Due \$ \_\_\_\_\_ Paid \$ \_\_\_\_\_ Balance Due \$ \_\_\_\_\_ Bill Me \_\_\_\_\_

Credit Card # \_\_\_\_\_ Zip Code \_\_\_\_\_ Exp. Date \_\_\_\_\_ Security Code \_\_\_\_\_

Authorization Signature: \_\_\_\_\_

Texas Lions Camp is a 501 (c) (3) organization and a portion of your contribution may be tax deductible. The charitable deduction is limited to the amount of the sponsorship in excess of the value of the goods and services provided.

**Please Return to:**  
**Texas Lions Camp, Inc – 4000 Highway 27 - Kerrville, TX 78028**  
**Phone (830) 896-8500 - FAX (830) 896-3666**

**HW-CPSPON**  
**2026**

**TEAM INFORMATION (Applicable to Title, Diamond and Emerald Sponsors):**

**PLAYER 1:** (Office use only - Player # \_\_\_\_\_ Team # \_\_\_\_\_ )  
HANDICAP: \_\_\_\_\_  
Team Contact Name: \_\_\_\_\_ Sponsored by: \_\_\_\_\_  
Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ Phone: \_\_\_\_\_  
Email: \_\_\_\_\_

**PLAYER 2:** (Office use only - Player # \_\_\_\_\_ Team # \_\_\_\_\_ )  
HANDICAP: \_\_\_\_\_  
Name: \_\_\_\_\_ Sponsored by: \_\_\_\_\_  
Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ Phone: \_\_\_\_\_  
Email: \_\_\_\_\_

**PLAYER 3:** (Office use only - Player # \_\_\_\_\_ Team # \_\_\_\_\_ )  
HANDICAP: \_\_\_\_\_  
Name: \_\_\_\_\_ Sponsored by: \_\_\_\_\_  
Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ Phone: \_\_\_\_\_  
Email: \_\_\_\_\_

**PLAYER 4:** (Office use only - Player # \_\_\_\_\_ Team # \_\_\_\_\_ )  
HANDICAP: \_\_\_\_\_  
Name: \_\_\_\_\_ Sponsored by: \_\_\_\_\_  
Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ Phone: \_\_\_\_\_  
Email: \_\_\_\_\_