



NATIONAL ITALIAN AMERICAN  
SPORTS HALL OF FAME

**TOMMY LASORDA OPEN**

2025 NIASHF GOLF OUTING

July 14, 2025

Name \_\_\_\_\_ Phone \_\_\_\_\_

Email \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

VIP Foursome: # \_\_\_\_\_ at \$5,000

Foursome: # \_\_\_\_\_ at \$2,500

Individual Golf Spot # \_\_\_\_\_ at \$650 each

Dinner Ticket: # \_\_\_\_\_ at \$175 each

Dinner Sponsor: # \_\_\_\_\_ at \$5,000

Cocktail Sponsor: # \_\_\_\_\_ at \$4,500

Gift Bag Sponsor: # \_\_\_\_\_ at \$2,500 each

Golf Cart Sponsor: # \_\_\_\_\_ at \$2,500

Caddie Sponsor: # \_\_\_\_\_ at \$1,800

Award Sponsor: # \_\_\_\_\_ at \$1,500

Hole in One Sponsor: # \_\_\_\_\_ at \$1,000 each

Breakfast Sponsor: # \_\_\_\_\_ at \$1,000 each

Driving Range Sponsor: # \_\_\_\_\_ at \$800 each

Hole Refreshment Sponsor: # \_\_\_\_\_ at \$750 each  
(Holes 5, 10, and 15)

Putting Green Sponsor: # \_\_\_\_\_ at \$500 each

Hole Sponsor: # \_\_\_\_\_ at \$300 each

PLAYER 1: \_\_\_\_\_

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

PLAYER 2: \_\_\_\_\_

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

PLAYER 3: \_\_\_\_\_

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

PLAYER 4: \_\_\_\_\_

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

Hole Sponsor Wording:

I authorize NIASHF to charge my credit card, in the amount of \_\_\_\_\_



Visa



Mastercard



Discover



Amex

Name on Card \_\_\_\_\_ Card Number \_\_\_\_\_

Expiration Date \_\_\_\_\_ Zip Code \_\_\_\_\_ Security Code \_\_\_\_\_

Authorized Signature \_\_\_\_\_

**Make checks payable to NIASHF**

Mail to: 3417 N. Harlem Ave.

Chicago, IL 60634

The NIASHF is a 501c3 non-profit corporation



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