

The MHE Research Foundation



Wings of HOPE as we REACH for the
CURE to Multiple Hereditary Exostoses

**PLEASE CIRCLE YOUR
SPONSORSHIP LEVEL BELOW:**

DIAMOND TOURNAMENT SPONSOR

\$10,000

- ✓ 8 golfers
- ✓ Display your banner & tee signage
- ✓ Special recognition

PLATINUM DINNER HALL SPONSOR

\$5,000

- ✓ 4 golfers
- ✓ Display your banner & tee signage
- ✓ Special recognition

GOLD GOLF CART SPONSOR

\$3,000

- ✓ 4 Golfers
- ✓ Special signage on all golf carts

SILVER LUNCH SPONSOR

\$1,500

- ✓ 2 Golfers
- ✓ Special Signage on lunch tables

BRONZE HOLE SPONSOR

\$700

- ✓ 1 Golfer
- ✓ Special Signage

PUTTING GREEN SPONSOR

\$500

- *GOLFER NOT INCLUDED
- ✓ Signage on Putting Green

HOLE SPONSOR

\$350

- *GOLFER NOT INCLUDED
- ✓ Signage at hole

INDIVIDUAL GOLFERS

\$200

DINNER ONLY (no golf)

\$75

**Sorry, I/We cannot attend the Classic.
Please accept the enclosed donation:
\$ _____**

NOTE - Your contribution less \$200 per golfer is tax
deductible.
(Tax ID# 42-1722962)

9TH ANNUAL MHE RESEARCH FOUNDATION GOLF OUTING MONDAY, AUGUST 25TH, 2025

Personal Information (This section must be completed)

Name: _____

Address: _____

City: _____ State _____ Zip _____

Email: _____

Phone: _____ Cell _____

TALAMORE COUNTRY CLUB

723 Talamore Drive

Ambler, PA 19002

Talamorecc.com

(215) 641-1300

**Please list the Additional Golfer's Names (\$200
per golfer)**

1. _____
2. _____
3. _____

☐ Add additional golfers to mailing list. (contact info on back).

Sponsorship Level or Golf Fee \$ _____

Dinner Only (\$75/pp) \$ _____

Total Payable to MHERF \$ _____

**To Register Online go to:
www.mherf.org/golf-outing-pa**

PAYMENT INFORMATION

Please make checks payable to:

MHE Research Foundation: 8019 Harbor

View Terrace, Brooklyn, NY 11209

*If you are paying by credit card, please complete all
of the information below.*

Please charge my ☐ VISA ☐ MasterCard ☐ AMEX

AMOUNT \$ _____ Card# _____

Exp ____/____/____ Security Code _____

Signature _____