

11th Annual **BREAKING PAR** at GRANDEZZA

Estero Council of Community Leaders (ECCL) is this years LEAD Sponsor!

April 1st & 2nd, 2023



All proceeds will fund educational initiatives for LEAD Estero.

Saturday, 8:30a.m. Shotgun Scramble

Hit the green at our signature Golf Tournament featuring lots of fun games and unique experiences.

Sunday, 5:30 p.m. Gala Dinner

Dress to impress at our coveted gala featuring delicious cuisine and incredible live and silent auctions.



GrandeZZa
Live the Grand Life



11481 Grande Oak Boulevard
Estero, Florida 33928



Scan with your phone
to sign up!

For more information, please contact us at
donate@LEADestero.com or 239-240-4341 www.LEADestero.com

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QUESTIONS:

Phone: 239-240-4341
Email: donate@LEADestero.com
www.LEADestero.com

LOCATION:

The Club at Grandezza
11481 Grande Oak Boulevard
Estero, FL 33928

SPONSORSHIPS:

PLATINUM Sponsor \$5,000
GOLD Sponsor \$1,000
SILVER Sponsor \$750
BRONZE Sponsor \$500
Special Games Sponsor \$400
Booth Sponsor \$300
Hole Sponsor \$150

SPECIAL GAMES:

Putting Contest 50/50 - on site
Closest to the Pin 50/50 - on site
Hole-in-One for a car - FREE
Bazooka Ball Contest - on site
Break the Glass Contest - on site

String Game - on site
Mulligans - on site

Completed form and payment due by March 12th - please submit to:
LEAD Estero at 12920 Metro Parkway - Fort Myers, FL 33966

REGISTER YOUR TEAM!

1: _____ Cell: _____ Handicap: _____
2: _____ Cell: _____ Handicap: _____
3: _____ Cell: _____ Handicap: _____
4: _____ Cell: _____ Handicap: _____

RESERVE YOUR TABLE AT THE GALA!

Guest 1: _____ Guest 5: _____
Guest 2: _____ Guest 6: _____
Guest 3: _____ Guest 7: _____
Guest 4: _____ Guest 8: _____

FEE TOTAL

\$ _____ Donation \$ _____ Golf Player(s) \$130 per person
\$ _____ Sponsorships \$ _____ Golf Team(s) \$500 per foursome
\$ _____ Gala Dinner Guest(s) \$80 per person
\$ _____ Gala Table(s) of eight \$600 per table
\$ _____ GRAND TOTAL

PAYMENT

PAYMENT METHOD: Check (payable to: LEAD Estero) Credit Card (circle one) VISA MASTERCARD
Credit Card #: _____ Exp: _____ Sec. Code: _____ Zip: _____
Company / Donor Name: _____ Contact Person: _____
Address: _____ City, State, Zip: _____
Phone: _____ Email: _____
Signature: _____