

26th Annual Golf Tournament
Friday, September 20, 2019
SILVERADO RESORT – NAPA CA

SPONSORSHIP REGISTRATION

Here is a great opportunity to market your business and have a lot of fun too! Sign up today to sponsor and participate in our Golf Tournament.

- Tee Sponsorship (Several Available):.....\$750
- Beverage Holes (Several Available):.....\$1,250
- Evening Reception:.....\$2,500*

Prize Sponsorships:

- Closest to Pin (Several Available):.....\$750
- Straightest Drive:.....\$750
- Longest Drive – Men:.....\$750
- Longest Drive – Women:.....\$750

TOTAL ENCLOSED: _____

*Evening Reception Sponsorship fee includes registration for two players from sponsoring company. To register, please complete a tournament registration form and note "sponsor" in the payment area.

*Outside food and beverages are not permitted. All food and beverage orders must go through the Silverado Resort. Please contact Jeff Parish at snackbarjeff@hotmail.com.

NAME: _____
COMPANY: _____
ADDRESS: _____
CITY, STATE, ZIP: _____
TELEPHONE: _____
E-MAIL: _____
TABLE NEEDED? Yes No If yes, how many chairs? _____

Please return this completed form along with your payment to:
Association of Defense Counsel of Northern California and Nevada
2520 Venture Oaks Way, Suite 150, Sacramento, CA 95833
(916) 239-4060 phone / (916) 924-7323 fax
www.adcncn.org / adcnc@camgmt.com

Choose Payment Method:

PLEASE DO NOT E-MAIL CREDIT CARD INFORMATION

- Register online at www.adcncn.org
- Check Enclosed (payable to ADCNCN)
- Charge Credit Card: Visa MasterCard AMEX
- Billing Address: _____
- Name on Credit Card: _____
- Signature: _____
- Exp. Date: _____ CVV: _____
- Credit Card #: _____

Pre-sorted
First Class
U.S. Postage
Paid
Permit #2045
Sacramento, CA

Association of Defense Counsel
of Northern California and Nevada
2520 Venture Oaks Way
Suite 150
Sacramento, CA 95833



The Association of Defense
Counsel of Northern California
and Nevada

26th Annual
Golf Tournament

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SILVERADO RESORT
SOUTH COURSE
NAPA, CALIFORNIA



Good Times, Great Golf



- 10:30 am** Registration
- 12:30 pm** All Golfers Should Be Checked In
- 1:00 pm** Shotgun Start South Course
4-Person Scramble Format
- 5:30 pm** Reception & Awards – Hosted Wine,
Beer & Hors d'oeuvres

The tournament registration fee is \$350

Please register by September 13, 2019 to secure your spot.

No refunds will be allowed for cancellations received after September 13, 2019.

The fee includes green fees, box lunch, golf cart for two, a hosted beer and wine reception, giveaways and a whole lot of fun. After the tournament, short putts and tall tales will be part of the menu when you join us for a private reception and awards giveaway. Appropriate golf attire and soft-spiked shoes only allowed.

— SILVERADO RESORT —
1600 Atlas Peak Road, Napa, CA 94558
(707) 257-0200 • www.silveradoresort.com

Wine Tasting

Ever wonder what it would be like to retire from civil defense practice and make wine for a living? That's exactly what our colleague Bob Bragg has done. Our wine tasting event this year will be an intimate tour and tasting of Cabernet Sauvignon at **Bragg Vineyards** in Calistoga. This afternoon event includes transportation, lunch, cheese tray, bottle and barrel tastings and tour of the vineyards and wine-making operation. This exclusive event is limited to the first 15 to register. Transportation is included. Price is \$150 per person.



Guest Rooms

For those of you desiring guest rooms at Silverado, the ADCNCN has a block of standard rooms at the rate of \$289 one bedroom suites at the rate of \$369 per night, each plus a \$25 resort fee. Rooms are extremely limited. Please reserve right away by calling 800-532-0500 or 707-257-0200.

Visit www.silveradoresort.com
for complete course and resort details.

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GOLF TOURNAMENT REGISTRATION FORM

\$350 Per person for tournament, cart, hosted beer & wine reception & prizes. \$65 per person for post-tournament reception only.

Please sign me up for the tournament!
 (Index if applicable _____)

NAME: _____
 FIRM: _____
 ADDRESS: _____
 CITY, STATE, ZIP: _____
 TELEPHONE: _____
 E-MAIL: _____

(If registering as a foursome, please make photocopies of this form)

Please sign my guest up for the tournament!
 (Index if applicable _____)

NAME: _____
 FIRM: _____
 ADDRESS: _____
 CITY, STATE, ZIP: _____
 TELEPHONE: _____
 E-MAIL: _____

I want to bring the following people to the reception only. (\$65.00 per person)

NAME: _____
 NAME: _____

of Golfers @ \$350 pp: AMOUNT: \$ _____
 # of Reception Guests @ \$65 pp: AMOUNT: \$ _____
 # of Wine Tasting Guests @ \$150 pp: AMOUNT: \$ _____

Total amount enclosed \$ _____

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Please register by September 13, 2019 to secure your spot!

Please Note: Registrations will not be processed unless accompanied by payment.

Choose Payment Method:

PLEASE DO NOT E-MAIL CREDIT CARD INFORMATION

Register online at www.adcncn.org
 Check Enclosed (payable to ADCNCN)
 Charge Credit Card: Visa MasterCard AMEX
 Billing Address: _____
 Name on Credit Card: _____
 Signature: _____
 Exp. Date: _____ CVV: _____
 Credit Card #: _____