

The Twenty-Second Annual

NEWFDA GOLF OUTING

*Play the South
Course!*


Monday May 16th, 2022
Lake of Isles
at Foxwoods Resort & Casino

Join us for a day of fun and networking
as we raise funds for the NEWFDA Scholarship Program!

Hole in One Contests & More!

Win in a Hole in One \$20,000 Contest, a
Trip to Superbowl 2023 or one of the many
other games & prizes on the course.

Cash Door Prizes • Incredible Raffle Items • Fantastic Food



Check-in/Breakfast	7:30 AM – 9:15 AM
Tee Time	9:30 AM
On-Course Lunch	11:30 AM
Dinner Buffet	2:30 PM

NEWFDA

Northeast Wholesale Food Distributors Association
Enriching our Industry through Networking & Education

PO Box 2826
Duxbury, MA 02331
617.922.4300

REGISTER NOW!

Download a registration form at
www.newfda.org

Contact Executive Director,
Kevin Griffin - 617.922.4300 - kgriffin@newfda.org
or
Director of Events & Finance,
Pauline Olson - 781-985-1786 - polson@newfda.org

NEWFDA GOLF OUTING

Monday May 16th, 2022

Lake of Isles - Private South Course
at Foxwoods Resort & Casino

REGISTRATION

Company Name: _____ Contact Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Email: _____

Credit Card Type: _____ Card #: _____

Expiration Date: _____ Sec. Code: _____ Billing Zip Code: _____

Please Send an Invoice

****To reserve a hotel room at Foxwoods, please contact Pauline at polson@newfda.org****

PARTICIPATION LEVEL

- ☐ Foursome \$2,800
(Includes hole sponsorship, greens fees, cart, meals)
- ☐ Single Player \$675
(Includes greens fees, cart, meals)
- ☐ Dinner Only \$250

SPONSORSHIP OPPORTUNITIES

Sponsoring a portion of the NEWFDA Golf Outing promotes your company while helping to offset cost of the event, allowing more funds to go to the NEWFDA Scholarship Fund. Your support will be recognized in various ways, as outlined in the following descriptions.

- ☐ Hole Sponsor \$650
(Includes sponsor signage with company logo featured at tee)
- ☐ Breakfast Sponsor \$2,000
(Includes sponsor signage with company logo featured prominently at breakfast)
- ☐ On-Course Lunch Sponsor \$5,000
(Includes sponsor signage with company logo featured prominently within boxed lunches)
- ☐ Après-Golf Dinner Sponsor \$7,500
(Includes sponsor signage with company logo featured prominently at Dinner)
- ☐ Scholarship Sponsor \$1,000
(Includes sponsor signage with company logo featured prominently at event)

PLAYERS NAMES

Player #1: _____

Email: _____

Player #2:

Email: _____

Player #3: _____

Email: _____

Player #4: _____

Email: _____

NORTHEAST WHOLESALE FOOD DISTRIBUTORS ASSOCIATION

ENRICHING OUR INDUSTRY THROUGH NETWORKING AND EDUCATION

PO Box 2826, Duxbury, MA 02331 • 617.922.4300 • kgriffin@newfda.org • polson@newfda.org



NEWFDA
NorthEast Wholesale Food Distributors Association

Office Use Only
Item #'s: _____

2022 Gift Bag Items & Raffle Prize Donation Form

Thank you for taking part in the 22nd Annual NEWFDA Golf Outing!
Please consider donating product for gift bags and items for the raffle.
A listing of generous donors will be prominently displayed at the outing.

DONOR INFORMATION

Company/Donor Name: _____
Contact Name: _____ Phone: _____
E-Mail: _____ Website: _____

GOODY BAG ITEMS

We appreciate any/all items donated to include in the "Goody Bags" distributed at the Golf Outing.
We anticipate 150 golfers.

PRODUCT DESCRIPTION

Name of Item(s): _____

RAFFLE PRIZES

These items will be set on display at the Golf Outing and included in the raffle. Items can include: sports event tickets, gift cards, sports equipment/apparel/memorabilia, etc. You are welcome to send raffle items to the NEWFDA office (address below), or bring the item(s) with you on the day of the Golf Outing. Thank you!

PRODUCT DESCRIPTION

Name of Item(s): _____ Value: _____
Name of Item(s): _____ Value: _____
Description of Item(s): _____

DONATION OF SERVICE OR A GIFT CERTIFICATE

If you are donating a service/gift certificate, please provide a letter that includes the following information (if not directly on the certificate):

- ✓ Name of product or service
- ✓ Description of what is included/excluded
- ✓ Name of person to contact for further information
- ✓ Instructions on how to redeem item
- ✓ Additional information such as a photo or brochure as appropriate
- ✓ Date of expiration

SHIPPING OPTIONS FOR GIFT ITEMS: (Please check one)

- ☐ Between now and May 13th, I will send the above listed **RAFFLE** items to NEWFDA

NEWFDA · Attn: Kevin Griffin · 18 Williams CT · Braintree, MA 02184 · c 617.922.4300

- ☐ Between May 9 – May 13, I will send above listed **GOODY BAG** items to TBD.

Please return this form to Pauline Olson at polson@newfda.org - 781.985.1786

Thank You!