METROPOLIS CUP
CHICAGO

Monday, October 5, 2026

The Club at Wynstone
1 S. Wynstone Dr., North Barrington, IL 60010

Sponsorship Opportunities

☐ **Tournament Sponsor • $25,000**
- Registration for two foursomes
- "Presented by" name and logo on website, registration table sign, and hole sponsorship sign

☐ **Dinner Sponsor • $15,000**
- Registration for one foursome
- Dinner sponsorship with recognition displayed
- Logo on flyers, website, and hole sponsorship sign

☐ **Tournament Ball Sponsor • $15,000**
- Registration for one foursome
- Logo on golf balls - *exclusive
- Logo on website and hole sponsorship sign
- You will receive 1 dozen sleeves of imprinted golf balls

☐ **Eagle Sponsor • $10,000**
- Registration for one foursome
- Logo on website and hole sponsorship sign

☐ **Lunch Sponsor • $10,000**
- Lunch sponsorship with recognition displayed
- Logo on website and hole sponsorship sign

☐ **Birdie Sponsor • $5,000**
- Logo on website, registration table, and hole sponsorship sign

☐ **Cocktail Hour Sponsor • $3,500**
- Your logo on cocktail napkins

☐ **Golf Cart Sponsors (5) • $2,500 each**
- Sign on golf cart (need 5)

☐ **Trophy Sponsor • $5,000**
- Traveling trophy with new engraved winner plate added each year
- Replica keepsake
- Logo on website and hole sponsorship sign

☐ **Beverage Cart Sponsor • $2,500**
- Sign on two beverage carts

☐ **Digital Scorecard Sign Sponsor • $1,000**
- Logo/name on digital scoreboard

☐ **Hole Sponsors • $500**
- Hole sponsorship sign

Sponsorship Total: $ _____
(please check boxes)

Scan the QR code to register online.

www.chicago.goarch.org/metropoliscup

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10:00 AM	Registration and Practice
10:30-11:45 AM	Lunch
12:00 PM	Shotgun Start
4:00-5:00 PM	Cocktails
5:30-7:00 PM	Dinner and Awards

** format of play is scramble*

Golfer Registration *(please check boxes)*

☐ Single Golfer • $500 ☐ Threesome • $1,500 ☐ Dinner Only • $200

☐ Twosome • $1,000 ☐ Foursome • $2,000

Foursome Partner Information

Team Contact:

Name _____ Phone _____

Street _____ City _____ State _____ ZIP _____

Email: _____ Handicap/Avg. Score _____

Players:

Name _____ Email _____ Handicap/Avg. Score _____

Name _____ Email _____ Handicap/Avg. Score _____

Name _____ Email _____ Handicap/Avg. Score _____

Credit Card Information

Name *(as appears on Credit Card)*: _____

Address: _____

Business Name *if company card*: _____

City, State, Zip: _____

Sponsorship Total $ _____
(please check boxes on previous page)

Registration Total $ _____

Grand Total $ _____

Credit Card Number: _____ Expiration Date: _____

Security Code: _____ Zip Code of Credit Card Billing Address: _____

Scan the QR code to register online at www.chicago.goarch.org/metropoliscup or return this completed form with your Credit Card Information or Check payable "Metropolis of Chicago" to 1290 N. Clybourn, Chicago, IL 60610