

Registration Form

Please complete and return by May 29, 2026.

Names of golfers in your foursome:

1. _____
2. _____
3. _____
4. _____

Sponsorship or Golfer Fees: \$ _____
of Easy Pass/Registration Specials at \$150 ea. _____
of 50/50 Raffle Tickets at \$20 ea. _____

Total enclosed \$ _____

Name _____

Company _____

Address _____

City _____

State _____ Zip _____

Phone _____

Email _____

Credit Card _____

Exp. Date _____

Signature _____

A portion of your payment is tax deductible.
Please make your check payable and mail to:

Foundation for Hackettstown Medical Center
653 Willow Grove Street, Suite 2500
Hackettstown, NJ 07840

Golf Committee

John H. Johnson, Chairman
Chuck Aaron
Mark Bahnuk
Jeff Day
Lisa Dimiceli
Stephen Flynn
Elise Holck-Rapp
Peter Olivieri
Karen Rinaldi
Megan Sandow
Michael Selvaggi
Dawn Sullivan
Jim Travis
Lori Walker
Kim Walsh
Bob Wanamaker
Norman Worth



Scan Me

For more information and to register:

Scan the QR code

Call 908-850-6876

Email kimberly.walsh@atlantichhealth.org

If you wish to be removed from our mailing list,
please send your request in writing.

Foundation for Hackettstown Medical Center
653 Willow Grove Street, Suite 2500
Hackettstown, NJ 07840



**Atlantic
Health**



**Atlantic
Health**

39th Annual Golf Classic

Monday, June 8, 2026
Panther Valley Golf & Country Club
Allamuchy, NJ

The Foundation for Hackettstown
Medical Center looks forward to
welcoming you!





Hole-In-One Sponsors

Holes 2 & 6

Sponsored by:

John Johnson Automotive Group



Schedule of the Day

Team Scramble Format

10:30 to 11:30am

Registration

Continental Breakfast

12:00pm

Shotgun Start

BBQ Lunch on the Course

5:00pm

(immediately following golf)

Cocktail Reception - Heavy Hors d'oeuvres

Awards

50/50 Raffle

Cash prize

- Tickets \$20 each
- Book of 5 for \$100

Don't miss this! In 2025, the 50/50 winner received over \$3,200!



All proceeds from this event will support the foundation's current initiative to raise \$1 million toward an exciting and much-needed \$6.5 million renovation/expansion of the Emergency Department at Atlantic Health Hackettstown Medical Center!

Sponsorship/Golf Reservation

(Please check all that apply)

- | | |
|---|--------------|
| <input type="checkbox"/> Presenting Sponsor | \$10,000 |
| Sponsor will receive two foursomes, eight guest dinner tickets, sign at event, company name and logo listed on event website, full page ad in digital event program and recognition in all media. | |
| <input type="checkbox"/> Platinum Sponsor | \$5,000 |
| One foursome, four guest dinner tickets, tee sign on front and back nine at event, company name and logo listed on event website and full page ad in digital event program. | |
| <input type="checkbox"/> Gold Sponsor | \$3,500 |
| One foursome, one tee sign, company name and logo listed on event website and half page ad in digital event program. | |
| <input type="checkbox"/> Dinner Sponsor | \$2,500 |
| Sign at dinner and recognition in digital event program. | |
| <input type="checkbox"/> Lunch Sponsor | \$1,500 |
| Sign at lunch stations and recognition in digital event program. | |
| <input type="checkbox"/> Beverage Cart Sponsor | \$1,000 |
| Sign on cart and recognition in digital event program. | |
| <input type="checkbox"/> Putting Green Sponsor | \$300 |
| Sign on green. | |
| <input type="checkbox"/> Tee Sponsor | \$250 |
| Tee sign on course. | |
| <input type="checkbox"/> Individual Golfer | \$325 |
| Includes all golfing fees, lunch and dinner. | |
| <input type="checkbox"/> Easy Pass/Registration Special | \$150 |
| Gives you express check-in, five 50/50 tickets and participation in all course contests. | |
| <input type="checkbox"/> 50/50 Raffle Ticket | \$20 each |
| <input type="checkbox"/> I cannot attend, but am sending a donation of \$_____ | |