



The Ryan Odelle Mance
MEMORIAL SCHOLARSHIP
FOUNDATION, INC.

*"Affirming African
 American Males'
 Academic and
 Artistic Ascent"*

**Tournament Hosted at The Swan Point
 Yacht & Country Club**
**11550 Swan Point Blvd. – Swan Point,
 Maryland 20645 – (301) 259-0047**

GOLF TOURNAMENT

SCHEDULE

Monday, May 18, 2009

- 9:00 AM Registration
- 10:00 AM Shotgun Start
- 3:00 PM Buffet Luncheon/Awards Presentation

Prizes

- Closest to the Pin – Holes #8 & #11
- Longest Drive – Hole #17
- Straightest Drive – Hole #5

Sponsorship/Corporate or Individuals

| | |
|-----------------------|-------------------------|
| Platinum Level | \$1,000 or above |
| Gold Level | \$500 - \$999 |
| Silver Level | \$250 - \$499 |

All sponsorships at these levels will receive print recognition on the Foundation's website and in event programs and articles as Founding Sponsors*. In addition, the Platinum sponsors will receive a 4-person team entry into the tournament.

*Donors who provide one-time or ongoing donations, at one of the three sponsorship levels, to the Foundation within the first three years of its establishment.

Cost is \$100 Per Player

Tournament Format: Captain's Choice
 Please complete the Player Entry Form below
 Registration Deadline: May 11, 2009

Mail completed form and your check(s) to:

The Ryan Odelle Mance
 Memorial Scholarship Foundation, Inc
 P.O. Box 725
 Accokeek, Maryland 20607

Please contact: Keith M. Lee, Board Member – The
 Ryan Odelle Mance Memorial Scholarship Foundation, Inc
 on (301) 452-3068, should you have any questions.

Price includes:

Greens fees, cart fee, range balls before the tourney,
 on course beverage cart includes: unlimited domestic
 beer, sodas, Poweraide and water.

CAN'T ATTEND?

The Ryan Odelle Mance Memorial Scholarship
 Foundation, Incorporated (the "Foundation") is a
 charitable organization described in Section 501(c)(3)
 of the Code. ALL PROCEEDS BENEFIT THE
 FOUNDATION.

Donation: \$ _____

Prize Donation: _____

PLAYER'S ENTRY FORM

Name 1 _____

Address _____

City/State/Zip _____

(H) _____ (O) _____

Name 2 _____

Address _____

City/State/Zip _____

(H) _____ (O) _____

Name 3 _____

Address _____

City/State/Zip _____

(H) _____ (O) _____

Name 4 _____

Address _____

City/State/Zip _____

(H) _____ (O) _____