



Benefitting the:



National
Kidney
Foundation™ of
Louisiana

22nd Annual Lafayette Liberty Mutual Insurance Invitational

Dear Friend:

Louisiana ranks #1 per capita in incidences of chronic kidney disease because of the high prevalence of high blood pressure and diabetes in our population. In Louisiana there are over 460,000 with chronic kidney disease, and nearly 10,000 on dialysis. Kidney disease kills over 90,000 Americans every year, more than breast or prostate cancer. There are nearly 135,000 people on the national waiting transplant list, and 1,800 are in Louisiana waiting for a kidney transplant. Nearly ten times more patients are now being treated for kidney failure than in 1980. The National Kidney Foundation of Louisiana provides programs and services to assist dialysis patients with medical supplies, transportation, and funds simply to make ends meet. Screenings take place to bring awareness to people who may be at risk and unaware. This disease affects people of all ages. Your sponsorship will help us to continue these programs.

With plans already in place for the 22nd Annual Lafayette Liberty Mutual Insurance Invitational, we are pleased to offer your company an official corporate sponsorship for Lafayette's premier amateur charity golf event. The Liberty Mutual Insurance Invitational is the #1 charity event in golf.

This year's tournament is scheduled for October 30, 2017 at Oakbourne Country Club in Lafayette. We are requesting that you consider a sponsorship contribution.

The general tournament format is a four-man scramble. Teams may be composed of players of any ability, and, for those teams who choose not to compete for the National sponsor prizes and the invitation to compete at Kiawah Island Golf Resort, the teams will compete for prizes in a separate low net division.

For teams wishing to compete for the invitation to the National Finals at Kiawah Island Golf Resort March 21-25, 2018 and other prizes from our National Sponsors, the event format is a four-man scramble with the team members having a combined USGA Handicap Index of 43.0 or more with only one member having an Index of 8.0 or less. All player handicap indexes will be verified before the tournament and on tournament day.

Last year, National Kidney Foundation of Louisiana golf tournaments raised over \$200,000 that went to meet the needs of Louisiana kidney patients. This year's Lafayette tournament is budgeted to raise \$50,000 and we are counting on your support.

If you have any questions or need additional sponsorship information, Torie Kranze at National Kidney Foundation of Louisiana, 504-861-4500, torie@kidneyla.org.

Thank you again for your support. I look forward to your favorable reply.

Sincerely,

Torie Kranze
Chief Executive Officer
National Kidney Foundation of Louisiana, Inc.

**WINNING FOURSOME INVITED TO THE NATIONAL FINALS AT
KIAWAH ISLAND GOLF RESORT!**

REGISTRATION

**22nd Annual Lafayette Liberty Mutual Invitational Golf Tournament
Benefiting the National Kidney Foundation of Louisiana**

**Monday, October 30, 2017
Oakbourne Country Club – Lafayette, Louisiana
11:30 a.m. Tee Off -- Shotgun Start**

Entry Fee: Corporate Team – \$1,000

**Make checks payable to: The National Kidney Foundation of Louisiana
Mail registration and payment to: The National Kidney Foundation of Louisiana
8200 Hampson St. #425; New Orleans, LA 70118
attn.: Lafayette “Liberty Mutual Invitational”
Fax: 504-861-1976**

Deadline for Registration: October 18, 2017 -- call 504-861-4500 for more information

Please fill this form out completely. Your registration can not be completed without all of the information requested below.

GOLFER INFORMATION

Name: _____ Email _____

Address: _____

City,State,Zip: _____ Phone: _____

*U.S.G.A. Handicap Index: ____ Club Affiliation: _____

Shirt Size: SM ____ MD ____ LG ____ XL ____ XXL ____

Name: _____ Email _____

Address: _____

City,State,Zip: _____ Phone: _____

Shirt Size: SM ____ MD ____ LG ____ XL ____ XXL ____

*U.S.G.A. Handicap Index: ____ Club Affiliation: _____

Name: _____ Email _____

Address: _____

City,State,Zip: _____ Phone: _____

*U.S.G.A. Handicap Index: ____ Club Affiliation: _____

Shirt Size: SM ____ MD ____ LG ____ XL ____ XXL ____

Name: _____ Email _____

Address: _____

City,State,Zip: _____ Phone: _____

*U.S.G.A. Handicap Index: ____ Club Affiliation: _____

Shirt Size: SM ____ MD ____ LG ____ XL ____ XXL ____