ORLANDO SPORTS FOUNDATION

TEEING OFF FOR THE CURE

THE 12TH ANNUAL CURE CUP

MARCH 22, 2027

ISLEWORTH GOLF & COUNTRY CLUB
ORLANDO, FLORIDA

Cure CUP™ 2027 ISLEWORTH

THE COURSE
A GOLFER'S PARADISE

Consistently ranked among the top golf courses in the country, Isleworth's 18-hole championship golf course was the creation of Arnold Palmer. Designed to provide a fair but challenging round, the signature course is built on rolling terrain, featuring greens that are generous, undulating and fast, highlighted by picturesque settings.

THE CUP

Join the excitement as Orlando's movers and shakers "tee off for the cure" at Isleworth Golf and Country Club. Registration begins at 7 am with a grab and go breakfast. The scramble starts at 9 am and is followed by an awards luncheon. Don't miss your chance to try your luck and test your golf skills in our on-course contests!

Register your sponsorship and players at *TheCureCup.org*

THE CAUSE

The Orlando Sports Foundation, Inc. is a 501(c)(3) organization dedicated to raising funding and awareness for organizations working to find a cure for cancer. OSF hosts many fundraising events throughout the year benefiting a short list of cancer research causes. **Funds raised from the 2027 Cure Cup will support crucial cancer research being conducted at UCF College of Medicine and its Lake Nona Cancer Center**

ORLANDO SPORTS FOUNDATION

UCF | College of Medicine
UNIVERSITY OF CENTRAL FLORIDA

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SPONSORSHIP OPPORTUNITIES

MARCH 22, 2027

ISLEWORTH GOLF & COUNTRY CLUB
ORLANDO, FLORIDA

	$4,000 BIRDIE	*$8,000* EAGLE	*$13,000* ALBATROSS	*$25,000* ACE
FOURSOME	1	2	3	4
HOLE YARD SIGNS	1	2	3	4
GOLFER SWAG BAGS	4	8	12	16
BRANDING: PUTTING GREEN			1	2
BRANDING: DRIVING RANGE			1	2
CUSTOM ACTIVATION				1
RECEPTION SPONSOR	SOLD - FFVA Mutual			

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ORLANDO, FLORIDA

Cure CUP 2027 ISLEWORTH™

GOLF REGISTRATION

NAME: COMPANY:

EMAIL: PHONE:

ADDRESS: CITY/STATE/ZIP:

FOURSOME NAMES:

1) 2)

3) 4)

SPONSORSHIP

☐ BIRDIE $4,000 ☐ EAGLE $8,000 ☐ ALBATROSS $12,000 ☐ ACE $25,000

PAYMENT INFO

Check (made payable to the Orlando Sports Foundation) OR
Credit Card Number: _____ Exp: _____
Name as it appears on Card: _____
Billing Name (if different from card): _____
Billing Address (if different from above): _____
Signature (approving charge): _____

PLEASE COMPLETE THE ABOVE FORM AND RETURN WITH SIGNATURE AND CHECK PAYABLE:

Orlando Sports Foundation
121 S Orange Ave.
Ste. 1500
Orlando, FL 32801

RESERVE YOUR SPONSORSHIP AND REGISTER YOUR PLAYERS AT WWW.THECURECUP.ORG