

The Arc of Katy was formed in 1990 and chartered as a 501(c) 3 non-profit organization serving intellectually and developmentally disabled individuals (IDD) living in the geographical boundaries of the Katy Independent School District. Its membership is composed of individuals with IDD, their families, friends, interested citizens and professionals in the disability field. The Arc of Katy identifies existing opportunities and where needed provides programs or services as well as educational and recreational activities for citizens with IDD.

In 2004 The Arc of Katy membership identified the need for programs for those out of the public school system who did not have the ability or opportunity for full time employment or other meaningful activity. Utilizing YMCA facilities in February 2005, The Arc of Katy Adult Activity Day Program (AADP) started with eight participants meeting two days a week. Today the AADP meets four days a week, has tripled the number of participants, and is highly regarded by the participants, their families, the instructors, and the community.

Our goal is to expand the Day Program and provide equivalent or better services for our individuals with IDD and insure that they have the opportunity to live their lives to the fullest. Our most pressing needs are: Facilities, Financial Stability, and Expanded Services

GOLF COMMITTEE

Dennis Kirwin, Chairman
Amy Campbell
Harla Kaplan
Karen Karapasha
Vicki Knowles
Mike Lattal
Don Smith
Steve Swanson
Richard White
Suzanne Winkler

For Information contact

The Arc of Katy at 832-754-9802 or
Dennis Kirwin at 281-676-8563 or
Email: dkirwin2@att.net
www.thearcofkaty.org

TOURNAMENT HIGHLIGHTS

Tournament Schedule

Registration, Open Range 10:00 am

Participants' goody bags will be distributed and the practice range will be available.

Tee Time: 12:00 Noon ~ Shotgun Start

Your name will be clearly printed on the golf cart assigned to you. Lunch will be provided

Rules of Play

Florida Scramble tournament rules to be announced. Prizes will be awarded at the banquet to be held immediately after play.

Contests

Longest Drive, Closest to the Pin, Mulligans and Tiger Drives available at registration

Dinner

Immediately following the tournament, please join the Arc of Katy and its special guests for an awards banquet, door prizes and raffle.

BOARD OF DIRECTORS

Harry Chapman, President
Mike Lattal, Vice President
Richard White, Secretary
Cindy Shiffler, Treasurer

Donna Bode
Barbara Dale
Ann Davis
Bill and Susan Hastings
Ann Hodge
Dennis Kirwin
Vicki Knowles
Mary Maltz



FIFTH ANNUAL GOLF CLASSIC

**MONDAY
OCTOBER 24, 2011**

**PINE FOREST
COUNTRY CLUB
18003 CLAY ROAD**

281-463-0900



Yes, We would like to participate in the Arc of Katy Golf Classic as a Sponsor.

Name

Company Name

Address

City, State Zip

Phone

Email

PLAYER BENEFITS INCLUDE:

All golf fees, driving range and carts, lunch for each player, on-course beverages, dinner and awards, player gifts, and raffle

Enclosed is my check for
\$ _____
(Please make checks to The Arc of Katy)

Please bill my credit card for
\$ _____
(Circle One) AMEX VISA MC

Card #: _____
Exp. _____ Security Code _____

I am unable to participate, enclosed is my
donation of \$ _____

**Mail Payment to:
The Arc of Katy
P. O. Box 6133
Katy, TX 77491**

SPONSOR LEVELS

- Platinum Sponsor (\$10,000)**
One team and all hole sponsor signs
- Gold Sponsor (\$5,000)**
One team and 5 hole sponsor signs
- Silver Sponsor (\$3,000)**
One team and 3 hole sponsor signs
- Bronze Sponsor \$2,000**
One team and 2 hole sponsor signs
- Friend of the Arc \$1,000**
One team and 1 hole sponsor sign
- Foursome (\$600)**
Four-player team
- Putting Green Sponsor (\$500)**
Company name on banner facing putting green
- Beverage Sponsor (\$500)**
Company name at beverage stations
- Cart Sponsor (\$500) (two only)**
Company information placed in each cart
- Hole Sponsors (\$200 each)**
Company recognition on golf course
- Individual (\$150)**
- Dinner Only (\$30)**
- Donation (\$ _____)**

PARTICIPATING PLAYERS

Name _____
Company _____
Address _____
City/Zip _____
Phone _____
Handicap _____

Name _____
Company _____
Address _____
City/Zip _____
Phone _____
Handicap _____

Name _____
Company _____
Address _____
City/Zip _____
Phone _____
Handicap _____

Name _____
Company _____
Address _____
City/Zip _____
Phone _____
Handicap _____

