

Pee Dee Medical Professionals Assoc., Inc. (PDMPA)

The Pee Dee Medical Professionals Association, Inc. is a 501 (c) 3 organization. Members consist of healthcare providers who are physicians, dentists, pharmacists, advanced practice providers, and allied health professionals committed to educating and enriching underserved communities.

It is our mission to decrease health disparities in the region. Since inception, PDMPA has placed a strong emphasis on advancing educational opportunities through student scholarships, promoting healthcare education, and maintaining a service-driven presence within the Pee Dee. Our mission is rooted in the belief that investment in education and intentional community engagement create long-term benefits.

Along with its sponsors, PDMPA has awarded over 45 student scholarships within the Pee Dee region. Collaborations with the community have also helped PDMPA continue expanding its healthcare mentorship, outreach, and annual "Walk to Health!" event offerings.

A Special Thank You

To the many sponsors, teams, community members, PDMPA Providers & volunteers for making this annual event such a success.

Tournament Organizer

Projects & Plans, LLC - Patricia E. Lewis
pdmpagolf@gmail.com - (843) 472-1614

6th Annual **GOLF**

T O U R N A M E N T F U N D R A I S E R

SATURDAY | AUGUST 22, 2026

Morning Schedule

7:45AM

Check-In & "Putting Practice"

8:30AM

Rules & Regulations

9:00AM

Shotgun Start



Afternoon Schedule

12:30PM

Public Raffle

1:30PM

Luncheon & Awards

2:00PM

Player Raffle

TRACES GOLF CLUB | Florence, SC

4322 Southborough Road | Florence, SC 29501 | 843.662.7775



ANNUAL GOLF TOURNAMENT FUNDRAISER

Saturday, August 22, 2026

9:00AM Shotgun Start

Four Man Captain's Choice

PLAYER REGISTRATION

\$85.00 per player includes:

- ✓ Green fees
- ✓ Beverages/snacks
- ✓ Golf cart
- ✓ 1 mulligan
- ✓ Clubhouse
- ✓ 1 green tee buster access

AWARDS: 1st, 2nd & 3rd Place

CONTESTS: Hole-In-1, Closest to the Pin & Longest Drive

RAFFLE: Player's Choice - participants choose which prizes they are playing for

SPONSORSHIP & TEAM

Registration Link:

[2026 PDMPA Annual GOLF TOURNAMENT Fundraiser - Google Forms](#)

It is strongly suggested for teams to register by August 11th as slots fill up fast.

SPONSORSHIP OPPORTUNITIES:

TITLE SPONSOR - \$2,500

Two (2) Foursomes in the tournament
Signage on marketing materials
Local media coverage with PDMPA
Center spread ad in PDMPA Provider Directory
Recognition at a selected hole of choice
+ Award Sponsor benefits

AWARD SPONSOR - \$1,500

Presenter at Awards Ceremony
Signage at Awards Display Table
+ Luncheon Sponsor benefits

LUNCHEON SPONSOR - \$1,000

One (1) Foursome team in the tournament
Special recognition on PDMPA social media
+ Hole in 1 Sponsor benefits

HOLE IN 1 SPONSOR - \$750

Signage at designated Hole in 1 location
Logo displayed on PDMPA website
Full-page ad in PDMPA Provider Directory
+ Golf Cart Sponsor benefits

GOLF CART SPONSOR - \$500

Signage on golf carts, snack/beverage stations
Half-page ad in PDMPA Provider Directory
Recognition in the event brochure
+ Tee Box Sponsor benefits

TEE BOX SPONSOR - \$300

Tee Box table set up for 2 (optional)
+ Hole Sponsor benefits

HOLE SPONSOR - \$150

Company signage on the green or club lawn

Note: Healthcare Sponsors receive a free table & 2 chairs at the next "Walk to Health!" event held in April.

PAYMENT DETAILS:

Total amount enclosed: \$ _____
for (check all that apply):

☐ Sponsor (Type: _____) ☐ Donation

☐ Team Fee (\$340) ☐ Player Fee (\$85)

☐ Additional Mulligan(s) _____ (see below)

☐ Raffle Entry _____ (see below)

In the form of: ☐ Check ☐ Cash ☐ PayPal
(PayPal service fee applies / Email required below)

☐ Yes, I would like to purchase **Mulligans**
in advance at \$10 each (max 1 extra per player)

____ # Additional Mulligans Desired = \$ _____

☐ Yes, I would like to purchase **Raffle Tickets**
in advance (1 for \$5, 5 for \$20 and 8 for \$30)

____ # Tickets Desired = \$ _____

(Please add these totals to your payment total above)

Full Name

Organization (if applicable)

Phone Number

Email

☐ Yes, I am the team captain for this team

CHECKS PAYABLE TO: PDMPA

Mail To: PDMPA / Golf Tournament
2117-B W. Palmetto Street, #342, Florence, SC 29501

PAYPAL: <https://paypal.me/PDMPA>