

2025 Lincoln Land Down Syndrome Society

19th Annual Golf Outing

Golf Outing Information

- When:** Friday, May 23th, 2025
- Where:** Edgewood Golf Club, Auburn
See www.golfedgewood.com
for directions and course policies.
- Schedule & Cost:** 11:00 am - Lunch/Registration
12:30 pm - Shotgun Start
5:00 pm - Dinner
Fee: \$100/Golfer
- Included:** 18 holes of golf and cart (Four Person Scramble), drink tickets, gift package, lunch and dinner.
- Prizes:** Cash prizes plus:
longest drive, longest putt
closest to the pin prizes.

LLDSS Information

For over 20 years LLDSS has acted as a support network for families having a member with Down syndrome residing in and around Sangamon County. LLDSS is an Illinois not-for-profit, tax-exempt organization, which promotes awareness, acceptance, inclusion and education of people with Down syndrome and other special needs.

Sponsorship Information

Money raised will go towards the LLDSS scholarship program. Our family members use the funds for enrichment programs such as sports activities, academic support and inclusive activities. Please consider becoming a Sponsor for this wonderful event.

Sponsorship Levels:

- \$125 tee box sponsor
- \$175 tee box sponsor with logo*
- \$275 lunch sponsor*
- \$550 dinner sponsor*
- \$1,200 event sponsor*

* E-mail your logo to info@lldss.org. Please make sure your logo is 300 dpi and is print ready.

Questions or Information?

LLDSS Website: www.lldss.org
LLDSS Facebook Page:
<https://www.facebook.com/LincolnLandDownSyndromeSociety/>
LLDSS Golf Outing Event Page:
<https://fb.me/e/9LKvTFXzS>

Call Jane Mosey-Nicoletta (Outing Co-Chair) – 217-971-4179



Golf Registration

- Check One. Golf Limited to 1st paid 36
foursomes -

Team Member #1: _____

Address: _____

City, State, Zip: _____

Email: _____

Team Member #2: _____ IF APPLICABLE

Address: _____

City, State, Zip: _____

Email: _____

Team Member #3: _____ IF APPLICABLE

Address: _____

City, State, Zip: _____

Email: _____

Team Member #4: _____ IF APPLICABLE

Address: _____

City, State, Zip: _____

Email: _____

Sponsor Registration

Sponsor Name: _____

Contact Name: _____

Contact Phone Number: _____

Sponsorship Level: \$ _____

Please register on-line at www.LLDSS.org or submit this registration and payment to:

LLDSS/Jane Mosey-Nicoletta
1808 S. Walnut Street
Springfield, IL 62704