

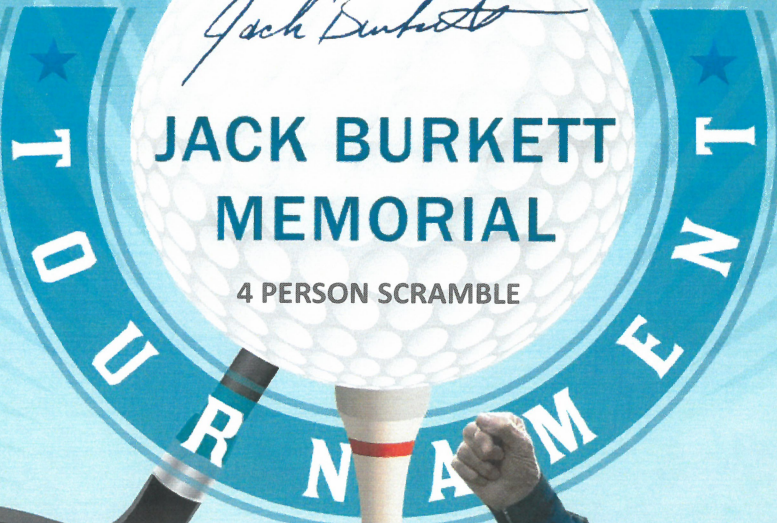
**KIWANIS-BRIDGEWAY
INAUGURAL**

GOLF

Jack Burckett

**JACK BURKETT
MEMORIAL**

4 PERSON SCRAMBLE



SATURDAY, OCTOBER 3, 2020 8:00AM

Fort Walton Beach Golf Club

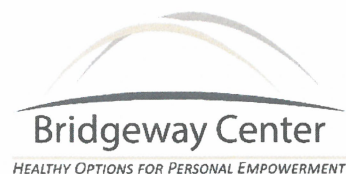
*Proceeds to Benefit
Bridgeway Center Wraparound Program*



Wraparound Services (WRAP) are designed to keep families intact while ensuring the safety of the children. The purpose is to increase children and adolescents safety and stability in their own homes.

Call Jon Morris 651-6998





REQUEST FOR CHARITABLE CONTRIBUTION

The Fort Walton Beach Kiwanis Club and Bridgeway Center, Inc. have joined to establish the **Inaugural Jack Burkett Memorial Golf Tournament on Saturday, October 3, 2020 at the Fort Walton Beach Golf Club**. Kiwanis and Bridgeway are both dedicated to the welfare and development of children. Jack Burkett was a Kiwanis member and served as a Bridgeway Trustee. His life was devoted to community service having been an Okaloosa County Commissioner. You may recall that Jack was a Choctaw High School graduate, an All-American football player at Auburn and a professional member of the Baltimore Colts, Dallas Cowboys and New Orleans Saints. We feel honored to establish this new tournament in his memory.

We are asking you to join with us in this important mission of our organizations to make Okaloosa and Walton Counties a safer, healthier and happier place to live. Bridgeway Center Inc. (BCI) specializes in Children and Adolescent Services, Psychiatric Medicine, Psychological/Psychosocial Wellness and Judicial Services. Operating from ten (10) locations, Bridgeway serves an average of approximately 9,000 patients a month. Of these nearly 2,000 are children. Attached is a complete listing of programs and services.

We are requesting your generous support. Please consider the benefits the supported programs will provide for the future of our community and the nation. Remember that Florida support for mental health ranks 50th in the country surpassing only Puerto Rico, so we need local contributions to make a difference.

SPONSORS: Platinum (\$2,500 – 2 teams); Gold (\$1,000 – 1 team)

Silver (\$500 – 1 team); Bronze (\$300 – 1 player): Hole (\$100)

Bonnie R. Barlow, SHRM-SCP, SPHR
Chief Executive Officer
Bridgeway Center, Inc.

Elizabeth Alef, President
Kiwanis Club of Fort Walton Beach

**KIWANIS--/BRIDGEWAY INAUGURAL
JACK BURKETT MEMORIAL GOLF TOURNAMENT
SATURDAY, OCTOBER 3, 2020 8:00 A.M.
FORT WALTON BEACH GOLF CLUB**

PROCEEDS TO BENEFIT BRIDGEWAY CENTER'S WRAPAROUND SERVICES

SPONSORS: PLATINUM (\$2,500---(3 TEAMS)); GOLD (\$1,000-- (2 TEAMS));

SILVER (\$500---(1 TEAM)); BRONZE (\$300---1 PLAYER)); HOLE (\$100)

Raffle Prize Donation—Organizations donating raffle prizes will be recognized at the tournament awards ceremony.

Gift Bag Donations—Organizations donating gift bag items (144 items) will be recognized at the awards ceremony.

GENERAL INFORMATION FOR ALL SPONSORS

1. Please send confirmation of sponsorship and check by September 15, 2020.
2. Please send donations for Gift Bags (minimum 144) no later than August 15, 2020.
3. Please send On Course/ Hole Signage—Sponsor Signage/Logo and other On Course Advertisement information by August 15, 2020.
4. For sponsorship levels that include golf participation, please provide name, address phone number, E-mail address and Handicap for each golfer by September 20, 2020.

All donations are tax deductible to the extent allowable under IRA regulations. See Form W-9

Corporate Sponsor Information

Company Name_____

Address_____

City_____State_____ZIP_____

Contact Person_____Title_____

Phone_____Fax_____E-Mail_____

Sponsorship Level Desired_____Dollar Amount Enclosed _____

Payment Type: Check or Cashier's Check (Circle One)

Please provide logo and/or digital artwork for banner and hole signage.

Mail to: GOLF, c/o Kiwanis/BCI, 205A Shell Ave., Fort Walton Beach, FL 32548

CALL: Jon Morris (850)651-6998 for additional information or clarification.

2020 TEAM REGISTRATION FORM

PLAYER #1

HANDICAP _____

NAME: _____

ADDRESS: _____

CITY /ST / ZIP: _____

HOME PHONE: _____ CELL PHONE: _____

EMAIL: _____

PLAYER #2

HANDICAP _____

NAME: _____

ADDRESS: _____

CITY /ST / ZIP: _____

HOME PHONE: _____ CELL PHONE: _____

EMAIL: _____

PLAYER #3

HANDICAP _____

NAME: _____

ADDRESS: _____

CITY /ST / ZIP: _____

HOME PHONE: _____ CELL PHONE: _____

EMAIL: _____

PLAYER #4

HANDICAP _____

NAME: _____

ADDRESS: _____

CITY /ST / ZIP: _____

HOME PHONE: _____ CELL PHONE: _____

EMAIL: _____

Individual Golf Registration Form

☐ Individual Player \$75 Quantity: _____

First Name _____

Last Name _____

Address _____

City/State/Zip _____

Home Phone _____ Cell Phone _____

Email _____

Total Amount Paid \$ _____

Payment Method:

☐ Check _____

☐ Visa _____

☐ MasterCard _____

☐ Discover _____

CC# _____ Exp. Date _____ CVV _____

Please make checks, corporate matches, and other donations payable to:

Kiwanis/BCI _____

Bridgeway Center, Inc. (BCI) is a 501c3 nonprofit organization. The IRS recognizes contributions made to BCI as tax deductible to the fullest extent of the law. Federal Tax Identification is 59-1278085.



Service Directory

CASE MANAGEMENT FOR CHILDREN & ADULTS

Case Management services link, monitor, and advocate for the child and family for services in the community while assisting with the reduction of Baker Act hospitalizations. In addition, parents and guardians are taught empowerment skills to obtain needed services for their children.

COMMUNITY ACTION TEAM (CAT) MOBILE CHILDREN & FAMILIES SUPPORT

The CAT program is a safe and effective alternative to out-of-home placement for youth, ages 11-21, with serious behavioral health challenges, mental health and/or co-occurring substance use and addictive disorders and other characteristics such as: involvement with DJJ or multiple episodes involving law enforcement.

COMPREHENSIVE BEHAVIORAL HEALTH ASSESSMENTS (DCF/FFN REFERRALS ONLY FOR DEPENDENCY COURT CASES)

Comprehensive Behavioral Health Assessments provide specific information and recommendations to accomplish family preservation, reunification, and permanency planning.

EARLY CHILDHOOD COURT (ECC)

ECC is focused on improving how the courts, child welfare agencies and related child-serving organizations work together to improve and expedite services for children, from birth to age three, who have been removed from their home. All parents and caregivers will have the opportunity to engage in Child Parent Psychotherapy (CPP).

CHILD PARENT PSYCHOTHERAPY (CPP)

An evidenced based treatment for trauma-exposed children aged 0-5.

VIOLENCE REDUCTION SERVICES

Suicide Risk Assessment, Batterers Intervention Program (BIP) and Anger Management Services are provided to individuals voluntarily seeking services or court ordered into treatment and Federal, State and County probationers.

HIV/AIDS EDUCATION

HIV/AIDS education and testing information is provided to these clients. Education is provided both in group and individual settings.

MENTAL HEALTH FIRST AID TRAININGS

Mental Health First Aid is an evidence based, nationally endorsed 8-hour course that teaches how to identify, understand and respond to signs of crisis associated with mental illness common in adults and youth.

GENOA PHARMACY ON-SITE SERVICES

BCI in partnership with Genoa a QoL Healthcare Company. Open Monday-Friday 8:30AM-5:00PM.
Closed for lunch 12:30-1:00PM.

MENTAL HEALTH TREATMENT FOR CHILDREN/ADULTS

Mental Health Therapy services provide a wide array of services for all age groups. Services available include children, individual, couples, family and group therapy for all mental health needs as well as life skills, classes all of which focus on the needs of the individual.

BEHAVIORAL MEDICINE

This program provides medical staff psychiatric evaluations and outpatient psychiatric treatment to include initial psychiatric evaluations and medication management for children, adolescents and adults.

MEDICATION ASSISTED TREATMENT (MAT) PROGRAM

MAT Program provides Medication Assisted Treatment (MAT) through Vivitrol for Opioid use disorders and alcohol use disorder along with Substance Abuse (SA) therapy.

Service Directory

WELLNESS CENTERS

Adult Psychosocial Rehabilitation service programs are designed for members of the community as well as residents, to help members learn psychosocial skills to manage their home, occupational lives, and social and interpersonal skills. Guest Services Apartments are available on a limited basis.

IN-HOME SUPPORTIVE SERVICES (IHSS)

In-Home Supportive Services (IHSS) works directly with the Department of Children and Families (DCF) and Families First Network (FFN) to provide an layer of support to the families, DCF and FFN. IHSS include daily living skills building and much more. Services are designed to be specific, focused, and time limited.

SUBSTANCE USE ADDICTION DISORDERS (SUAD) & INTENSIVE OUTPATIENT (IOP) TREATMENT

The Substance Use Addiction Program offers individual and group counseling to adults and adolescents designed to meet the individual's needs in treatment. The goal of treatment is to maintain abstinence while developing a lifestyle conducive to living substance free. Intensive Outpatient Services are available. IOP-SUAD provides comprehensive programming nine hours in three days a week for persons with significant and persistent substance use who have tried other treatment programs and continue to use despite the negative life outcomes. Services include group and individual sessions each week for 16 weeks.

FAMILY CARE UNIT (DCF/FFN REFERRALS ONLY FOR DEPENDENCY COURT CASES)

The Family Care Unit works directly with DCF referred families and children to initiate family reunification plans. FCU counselors act as a court liaison to ensure the parents participation in recommended services are accurately provided to other service providers and the court.

WRAPAROUND FAMILY SUPPORT SERVICES

Wraparound Family Support Services is a Diversion Service focused on High and Very High Risk families with children determined to be safe with no present or impending danger. Referrals are received from DCF.

EARLY CHILDHOOD SERVICES

Parenting, Child-Parent Psychotherapy, Child Case Management, Community Outreach, Early Childhood Court (ECC), Circle of Security (COS), etc..

FAMILY & ADOLESCENT CARE FOR BEHAVIORAL HEALTH NEEDS

Support Groups, School Services, Nurturing Parenting/Circle of Security Classes (COS), etc.

SUBSTANCE ABUSE SERVICES FOR ADOLESCENTS

Intensive Outpatient (IOP) Treatment, 7 Challenges Group, etc.

ADOLESCENT SUBSTANCE USE COUNSELING

This program accepts referrals from other BCI programs and provides drug education and/or substance abuse treatment based on the need. Services include intervention, prevention and treatment services for children and adolescents ages 12 to 17 with substance abuse concerns.

MENTAL HEALTH PRE-TRIAL PROGRAM

Okaloosa County, Big Bend Community Based Care, Inc., and BCI have a tri-party contract to administer the pilot program for the Okaloosa County Mental Health Pre-Trial Program (MHPP). Okaloosa County Pretrial Services and BCI will work in conjunction with the Judiciary, State Attorney and Public Defenders Offices to provide this program to eligible individuals. The MHPP is a voluntary, accountability program that requires participants to be actively involved in recovery. The MHPP will be utilized in several different ways: 1) as a condition of bond 2) as a condition of Mental Health Court and 3) as a condition of sentence. The program can serve up to 15 participants at time; up to ninety (90) days. The participants can be a combination of both occupants, and those that live in the community who come to the program daily.

Request for Taxpayer Identification Number and Certification

► Go to www.irs.gov/FormW9 for instructions and the latest information.

Give Form to the
requester. Do not
send to the IRS.

Print or type.
See Specific Instructions on page 3.

1 Name (as shown on your income tax return). Name is required on this line; do not leave this line blank. Bridgeway Center Inc	
2 Business name/disregarded entity name, if different from above	
3 Check appropriate box for federal tax classification of the person whose name is entered on line 1. Check only one of the following seven boxes. <input type="checkbox"/> Individual/sole proprietor or single-member LLC <input type="checkbox"/> Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=Partnership) ► _____ Note: Check the appropriate box in the line above for the tax classification of the single-member owner. Do not check LLC if the LLC is classified as a single-member LLC that is disregarded from the owner unless the owner of the LLC is another LLC that is not disregarded from the owner for U.S. federal tax purposes. Otherwise, a single-member LLC that is disregarded from the owner should check the appropriate box for the tax classification of its owner. <input checked="" type="checkbox"/> Other (see instructions) ► Non-Profit	4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3): Exempt payee code (if any) _____ Exemption from FATCA reporting code (if any) _____ <small>(Applies to accounts maintained outside the U.S.)</small>
5 Address (number, street, and apt. or suite no.) See instructions. 205A Shell Avenue 6 City, state, and ZIP code Fort Walton Beach, FL 32548	7 List account number(s) here (optional)

Part I Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. The TIN provided must match the name given on line 1 to avoid backup withholding. For individuals, this is generally your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the instructions for Part I, later. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN*, later.

Note: If the account is in more than one name, see the instructions for line 1. Also see *What Name and Number To Give the Requester* for guidelines on whose number to enter.

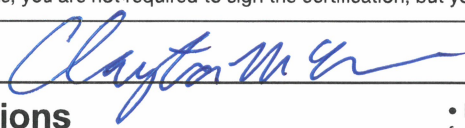
Social security number									
			-				-		
or									
Employer identification number									
5	9	-	1	2	7	8	0	8	5

Part II Certification

Under penalties of perjury, I certify that:

- The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me); and
- I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding; and
- I am a U.S. citizen or other U.S. person (defined below); and
- The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct.

Certification instructions. You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally, payments other than interest and dividends, you are not required to sign the certification, but you must provide your correct TIN. See the instructions for Part II, later.

Sign Here	Signature of U.S. person ► 	Date ► 1-30-20
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General Instructions

Section references are to the Internal Revenue Code unless otherwise noted.

Future developments. For the latest information about developments related to Form W-9 and its instructions, such as legislation enacted after they were published, go to www.irs.gov/FormW9.

Purpose of Form

An individual or entity (Form W-9 requester) who is required to file an information return with the IRS must obtain your correct taxpayer identification number (TIN) which may be your social security number (SSN), individual taxpayer identification number (ITIN), adoption taxpayer identification number (ATIN), or employer identification number (EIN), to report on an information return the amount paid to you, or other amount reportable on an information return. Examples of information returns include, but are not limited to, the following.

- Form 1099-INT (interest earned or paid)

- Form 1099-DIV (dividends, including those from stocks or mutual funds)
- Form 1099-MISC (various types of income, prizes, awards, or gross proceeds)
- Form 1099-B (stock or mutual fund sales and certain other transactions by brokers)
- Form 1099-S (proceeds from real estate transactions)
- Form 1099-K (merchant card and third party network transactions)
- Form 1098 (home mortgage interest), 1098-E (student loan interest), 1098-T (tuition)
- Form 1099-C (canceled debt)
- Form 1099-A (acquisition or abandonment of secured property)

Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN.

If you do not return Form W-9 to the requester with a TIN, you might be subject to backup withholding. See What is backup withholding, later.

By signing the filled-out form, you:

1. Certify that the TIN you are giving is correct (or you are waiting for a number to be issued),
2. Certify that you are not subject to backup withholding, or
3. Claim exemption from backup withholding if you are a U.S. exempt payee. If applicable, you are also certifying that as a U.S. person, your allocable share of any partnership income from a U.S. trade or business is not subject to the withholding tax on foreign partners' share of effectively connected income, and
4. Certify that FATCA code(s) entered on this form (if any) indicating that you are exempt from the FATCA reporting, is correct. See *What is FATCA reporting*, later, for further information.

Note: If you are a U.S. person and a requester gives you a form other than Form W-9 to request your TIN, you must use the requester's form if it is substantially similar to this Form W-9.

Definition of a U.S. person. For federal tax purposes, you are considered a U.S. person if you are:

- An individual who is a U.S. citizen or U.S. resident alien;
- A partnership, corporation, company, or association created or organized in the United States or under the laws of the United States;
- An estate (other than a foreign estate); or
- A domestic trust (as defined in Regulations section 301.7701-7).

Special rules for partnerships. Partnerships that conduct a trade or business in the United States are generally required to pay a withholding tax under section 1446 on any foreign partners' share of effectively connected taxable income from such business. Further, in certain cases where a Form W-9 has not been received, the rules under section 1446 require a partnership to presume that a partner is a foreign person, and pay the section 1446 withholding tax. Therefore, if you are a U.S. person that is a partner in a partnership conducting a trade or business in the United States, provide Form W-9 to the partnership to establish your U.S. status and avoid section 1446 withholding on your share of partnership income.

In the cases below, the following person must give Form W-9 to the partnership for purposes of establishing its U.S. status and avoiding withholding on its allocable share of net income from the partnership conducting a trade or business in the United States.

- In the case of a disregarded entity with a U.S. owner, the U.S. owner of the disregarded entity and not the entity;
- In the case of a grantor trust with a U.S. grantor or other U.S. owner, generally, the U.S. grantor or other U.S. owner of the grantor trust and not the trust; and
- In the case of a U.S. trust (other than a grantor trust), the U.S. trust (other than a grantor trust) and not the beneficiaries of the trust.

Foreign person. If you are a foreign person or the U.S. branch of a foreign bank that has elected to be treated as a U.S. person, do not use Form W-9. Instead, use the appropriate Form W-8 or Form 8233 (see Pub. 515, Withholding of Tax on Nonresident Aliens and Foreign Entities).

Nonresident alien who becomes a resident alien. Generally, only a nonresident alien individual may use the terms of a tax treaty to reduce or eliminate U.S. tax on certain types of income. However, most tax treaties contain a provision known as a "saving clause." Exceptions specified in the saving clause may permit an exemption from tax to continue for certain types of income even after the payee has otherwise become a U.S. resident alien for tax purposes.

If you are a U.S. resident alien who is relying on an exception contained in the saving clause of a tax treaty to claim an exemption from U.S. tax on certain types of income, you must attach a statement to Form W-9 that specifies the following five items.

1. The treaty country. Generally, this must be the same treaty under which you claimed exemption from tax as a nonresident alien.
2. The treaty article addressing the income.
3. The article number (or location) in the tax treaty that contains the saving clause and its exceptions.
4. The type and amount of income that qualifies for the exemption from tax.
5. Sufficient facts to justify the exemption from tax under the terms of the treaty article.

Example. Article 20 of the U.S.-China income tax treaty allows an exemption from tax for scholarship income received by a Chinese student temporarily present in the United States. Under U.S. law, this student will become a resident alien for tax purposes if his or her stay in the United States exceeds 5 calendar years. However, paragraph 2 of the first Protocol to the U.S.-China treaty (dated April 30, 1984) allows the provisions of Article 20 to continue to apply even after the Chinese student becomes a resident alien of the United States. A Chinese student who qualifies for this exception (under paragraph 2 of the first protocol) and is relying on this exception to claim an exemption from tax on his or her scholarship or fellowship income would attach to Form W-9 a statement that includes the information described above to support that exemption.

If you are a nonresident alien or a foreign entity, give the requester the appropriate completed Form W-8 or Form 8233.

Backup Withholding

What is backup withholding? Persons making certain payments to you must under certain conditions withhold and pay to the IRS 24% of such payments. This is called "backup withholding." Payments that may be subject to backup withholding include interest, tax-exempt interest, dividends, broker and barter exchange transactions, rents, royalties, nonemployee pay, payments made in settlement of payment card and third party network transactions, and certain payments from fishing boat operators. Real estate transactions are not subject to backup withholding.

You will not be subject to backup withholding on payments you receive if you give the requester your correct TIN, make the proper certifications, and report all your taxable interest and dividends on your tax return.

Payments you receive will be subject to backup withholding if:

1. You do not furnish your TIN to the requester,
2. You do not certify your TIN when required (see the instructions for Part II for details),
3. The IRS tells the requester that you furnished an incorrect TIN,
4. The IRS tells you that you are subject to backup withholding because you did not report all your interest and dividends on your tax return (for reportable interest and dividends only), or
5. You do not certify to the requester that you are not subject to backup withholding under 4 above (for reportable interest and dividend accounts opened after 1983 only).

Certain payees and payments are exempt from backup withholding. See *Exempt payee code*, later, and the separate Instructions for the Requester of Form W-9 for more information.

Also see *Special rules for partnerships*, earlier.

What is FATCA Reporting?

The Foreign Account Tax Compliance Act (FATCA) requires a participating foreign financial institution to report all United States account holders that are specified United States persons. Certain payees are exempt from FATCA reporting. See *Exemption from FATCA reporting code*, later, and the Instructions for the Requester of Form W-9 for more information.

Updating Your Information

You must provide updated information to any person to whom you claimed to be an exempt payee if you are no longer an exempt payee and anticipate receiving reportable payments in the future from this person. For example, you may need to provide updated information if you are a C corporation that elects to be an S corporation, or if you no longer are tax exempt. In addition, you must furnish a new Form W-9 if the name or TIN changes for the account; for example, if the grantor of a grantor trust dies.

Penalties

Failure to furnish TIN. If you fail to furnish your correct TIN to a requester, you are subject to a penalty of \$50 for each such failure unless your failure is due to reasonable cause and not to willful neglect.

Civil penalty for false information with respect to withholding. If you make a false statement with no reasonable basis that results in no backup withholding, you are subject to a \$500 penalty.