

REGISTRATION FORM



Name: _____

Company: _____

Business Phone/Ext: _____

Business Mailing Address: _____

Preferred E-mail: _____

Team Flurry \$80/Team

Number: _____

Golf Carts

4 Man: \$150/Cart _____
(Unless included with your sponsorship package)

Number: _____

Shells

\$10/Box (4 Boxes required for one round)

Number of Boxes: _____

Shotshell Size Amount: _____

Please select a sponsorship level:

\$5,500
Special Sponsor Recognition
Four teams (four shooters)
ONE flurry per team
Golf carts

\$200 FOR FEATURED SIGNAGE SPONSORSHIP

\$2,000
Special Sponsor Recognition
Two teams (four shooters)
ONE flurry per team
Golf carts

\$800
Special Sponsor Recognition
One team (four shooters)
ONE flurry

\$2,500
Special Sponsor Recognition
Three teams (four shooters)
ONE flurry per team
Golf carts

\$900
Special Sponsor Recognition
One team (4 shooters)
ONE flurry
One (1) golf cart

\$160
Single shooter
(Individual shooters will be placed on teams if necessary)



AMMO IS NOW INCLUDED FOR ALL SPONSORSHIP LEVELS!

Please return your registration form & check by February 9th.

Golf carts are first come first serve.
Please register by **FEB 9TH** to ensure your reservation.

TOTAL ENCLOSED:

\$ _____

TEAM 1

- 1. _____ 12 20
- 2. _____ 12 20
- 3. _____ 12 20
- 4. _____ 12 20

TEAM 2

- 1. _____ 12 20
- 2. _____ 12 20
- 3. _____ 12 20
- 4. _____ 12 20

TEAM 3

- 1. _____ 12 20
- 2. _____ 12 20
- 3. _____ 12 20
- 4. _____ 12 20

TEAM 4

- 1. _____ 12 20
- 2. _____ 12 20
- 3. _____ 12 20
- 4. _____ 12 20

\$_____ I'm unable to attend. Please find my contribution in the written amount.



PRINT & MAIL THIS FORM + YOUR CHECK TO:
2680 McFADDIN AVE | BEAUMONT, TX 77702

***PLEASE MAKE CHECKS PAYABLE TO
CARDIOVASCULAR FOUNDATION
OF SOUTHEAST TEXAS**