

Registration & Sponsorship Form

Please check the team registration and/or sponsorship level you would like. See the sponsorship form for more details on each level. Please use a separate form for each foursome. All fees are due in full before the tournament.

- | | | | |
|--------------------------|--|--------------------------|---|
| <input type="checkbox"/> | \$900
<i>Foursome</i> | <input type="checkbox"/> | \$225
<i>Single Player</i> |
| <input type="checkbox"/> | \$5,200
<i>Eagle</i> | <input type="checkbox"/> | \$3,200
<i>Birdie</i> |
| <input type="checkbox"/> | \$1,700
<i>Par</i> | <input type="checkbox"/> | \$1,000
<i>Orange Crush Bar</i> |
| <input type="checkbox"/> | \$500
<i>Closest to the Pin Hole</i> | <input type="checkbox"/> | \$250
<i>Play A Round Hole</i> |
| <input type="checkbox"/> | \$250
<i>Cooler Hole</i> | <input type="checkbox"/> | Hole Sponsor |
- \$100 = 1 Hole Sign
 \$150 = 2 Hole Signs

Primary Contact Name: _____

Company/Sponsorship Name: _____

Address: _____ City: _____ State: _____ Zip: _____

Phone: _____ Email: _____

	Player Name	Email	Phone
1			
2			
3			
4			

TEAM NAME

TEAM/PLAYER: \$ _____

SPONSORSHIP LEVEL: \$ _____

GENERAL DONATION: \$ _____

TOTAL DUE: \$ _____

Payment: Check enclosed Mastercard Visa American Express Discover

Account #: _____

Exp. Date (MM/YY): ____ / ____ 3-digit Code: _____ Billing Zip Code: _____

Name on Card: _____

Make checks payable to **Believe In Tomorrow Children's Foundation** & mail to:
Believe In Tomorrow Golf Classic, P.O. Box 3627, Ocean City, MD 21843



Thank you
for your
support!