

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.

	SOLD OUT	SOLD	OUT
SOLD OUT	SOLD OUT	SOLD	SOLD OU
\$500 Closest to the Pin H	\$250	ole S250	
Primary Contact N	lame:		
Company/Sponso	orship Name:		
Address:		City:	State: Zip:
Phone:		. Email:	
	Player Name	Email	Phone
1			
2			
3			
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	TEAM NAME	s	TEAM/PLAYER: \$PONSORSHIP LEVEL: \$
Payment: Check e	nclosed Mastercard Visa		SENERAL DONATION: \$
			•
	/ 3-digit Code: [for your support!
Name on Card:			. for your

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