

Player #1 _____
Address _____
City/State/Zip Code _____
Email _____

Player #2 _____
Address _____
City/State/Zip Code _____
Email _____

Player #3 _____
Address _____
City/State/Zip Code _____
Email _____

Player #4 _____
Address _____
City/State/Zip Code _____
Email _____

TOURNAMENT HOST	\$7,500
LUNCH SPONSOR	\$3,500
RANGE SPONSOR	\$2,500
19TH HOLE SPONSOR	\$2,000
PRACTICE GREEN SPONSOR WITH FOURSOME	\$1,200
PRACTICE GREEN SPONSOR WITHOUT FOURSOME	\$600
TEE SPONSOR	\$500
BLUE & GOLD SPONSOR	\$250
PLAYER FEE	\$175
I cannot attend, please accept my donation of	\$ _____

Name of Sponsor Company/Donor _____

Contact Name and Email _____

Register to play online at <https://www.scsnorwood.com/support-scs/golf-tournament>

Please make checks payable to Saint Catherine of Siena School Golf Tournament

Bill My Credit Card



Name on Card _____

Card Number _____ Expiration Date _____ CID _____

Email _____

Please return registration form using the enclosed envelope before September 23, 2022