

Team Registration

| Team Name: | |
|---|---|
| *Business to be listed as Sponsor: | |
| | (*If applicable) |
| Your Name: | Your E-mail Address: |
| Your Mailing Address: | |
| Your Phone Number: | |
| Twosome | Twosome |
| Player 1 Name: | Player 3 Name: |
| Player 2 Name: | Player 4 Name: |
| We will need a golf cart provided | We will need a golf cart provided |
| We will use our own golf cart | We will use our own golf cart |
| Registration Fees: | |
| □ \$350 - Foursome registering before May 1st, | , 2023 |
| □ \$400 - Foursome registering May 1st, 2023 c | pr later |
| □ Sponsorship: S | ponsorship Amount: |
| Signed: Dat | e: Total Amount Enclosed: \$ |
| | received will be considered a donation to The Pride Group. |
| | anization and contributions are tax deductible. |
| | ion form and cash/check payment to: 4 Plymouth St. SE, Le Mars, IA 51031 |
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All questions may be directed to SarahJ@thepridegroup.org