

**Hope Pregnancy Resource Center
Annual Benefit Golf Tournament
Saturday, May 15, 2010 at Boone Golf Club**

Shotgun Start – 8 AM
Registration and Breakfast – 7 AM
Lunch and Prizes Following Golf

Registration Form

Name: _____

Mailing Address: _____

City: _____ State _____ Zip _____

Phone: _____ E-Mail: _____

Team Members: Name (Address, City, State, Zip, Phone, Email)

(2) _____,

(3) _____,

(4) _____.

- Individual registration - team-up with others (unknown) upon arrival
- Team Registration with a Pastor
- Team Registration

PASTORS PLAY FREE on a team with 3 paying players at \$100 each

PAYMENT: Registration Fee:

Totals

(#) _____ @ \$100 \$ _____
(#) _____ Team(s) @ \$400 (minus \$100 if with a Pastor) \$ _____

Optional Choices:

(#) _____ One Tee Buster and Two Mulligans @ \$20 \$ _____
(#) _____ Team Tiger Drive @ \$20 (One per team) \$ _____

Has your team lying at 0 at 150 yards out on par 5 #17

Total Amount Enclosed

\$ _____

Please Check Payment Method:

(Registration Payment Must Accompany This Form)

MasterCard Visa (A \$3 service fee will be added for credit card transactions)

Cardholder's Name _____ Account # _____

Exp. Date _____ Signature _____

Billing address if different from above _____

If paying by credit card, you may either fax this completed form to 828-262-3951 or email it to brian_lowe@bellsouth.net.

Check payable to Hope PRC

There is a \$30 processing fee for returned checks. Do not send cash.

Deadline for registration is Wednesday, May 12, 2010

If paying by check, please return this form and payment to:

Hope PRC, 232 Furman Road, Boone, NC 28607

For additional information contact Brian Lowe at (828) 262-3951 or brian_lowe@bellsouth.net