

8th Annual **Holes Fore Hospice**: Saturday, July 8 The Tips Golf Course

Name: _____

Phone: _____ Address: _____

Email: _____

Handicap: _____ How often do you golf? _____ Average Score: _____

Registration:

\$ _____ ~~\$80~~ **\$60*** early bird rate!

\$ _____ \$15 Pick you own team (Team name: _____)

\$ _____ \$5 Bag of balls for Closest to the Pin Competition

\$ _____ \$5 Mulligans

\$ _____ Additional donation (Hospice of Homer is a 501 (c)3 organization.
Tax ID: 92-0115943)

\$ _____ TOTAL — Thank you!

Payment method: Check Cash Credit Card (see below)

**On site registration is \$80. All early registrants will be entered to win a door prize.*

Credit Card Payment Information:

____ Visa ____ Mastercard ____ Discover ____ American Express

Card Number: _____

CVC code: _____ (three digit code on back of card) Expiration Date: __/__/__

Billing address: _____

City: _____ State: _____

Signature: _____

