



MONDAY, SEPTEMBER 16, 2019
THE WOODLANDS CLUB • FALMOUTH, ME
11 AM SHOTGUN START

TEAM & SPONSORSHIP REGISTRATION

- TEAM \$1,600 INDIVIDUAL(S) \$400 x _____
 I want to Put Children First and choose the _____ sponsorship for \$ _____

Please return this form by Friday, July 19. Forms returned after the due date will not be guaranteed a golf gift bag.

Company: _____

Contact Name: _____

Billing Address: _____

City: _____ State: _____ Zip: _____

Email: _____

Phone: _____

TEAM INFORMATION

PLAYER 1: Name: _____ Email: _____
 M F Handicap: _____ Shoe Size: _____ Golf Shirt Size: S M L XL 2XL 3XL

PLAYER 2: Name: _____ Email: _____
 M F Handicap: _____ Shoe Size: _____ Golf Shirt Size: S M L XL 2XL 3XL

PLAYER 3: Name: _____ Email: _____
 M F Handicap: _____ Shoe Size: _____ Golf Shirt Size: S M L XL 2XL 3XL

PLAYER 4: Name: _____ Email: _____
 M F Handicap: _____ Shoe Size: _____ Golf Shirt Size: S M L XL 2XL 3XL

PROGRAM AD SUBMISSION

Please submit artwork by Friday, August 16 to pcostell@ccmaine.org.

Half page ad: 5"(w) x 3.875" (h) Full page ad: 5" (w) x 8" (h) FORMAT: PDF, JPEG or Tiff. Resolution should be 300 dpi. Ad is full color.

PAYMENT OPTIONS

- Send Invoice Check Enclosed (*Please make check payable to Catholic Charities Maine Golf Classic*)
 Payment by Credit Card: Visa MasterCard Discover American Express

Card #: _____ Exp. Date: ____/____

Cardholder Name: _____ Zip code associated with card: _____

Signature: _____ CVV Code: _____

Credit card payments may also be made online at www.ccmaine.org/golf

PLEASE RETURN FORM TO: Catholic Charities Maine, Attn: Golf Classic, P.O. Box 10660, Portland, ME 04104-6060
by Friday, July 19 **OR FAX TO:** (207) 781-8560 **QUESTIONS?** Please email development@ccmaine.org