REGISTER NOW

Return this completed form by Monday, June 19, 2017 with payment to: TSMSDC 2017 Golf Classic

 □ Platinum Sponsor, \$7,000 □ Gold Sponsor, \$4,000 □ Silver Sponsor, \$3,000 □ Bronze Sponsor, \$2,000 □ Supporter Sponsor, \$1,00 □ Hole Sponsor, \$700 	☐ Individual Entry Fee,☐ Non-golfer's Breakfa	\$220 each est, \$10 each \$10 each	Check Flight Preference: Morning (8:00 a.m.) Afternoon (1:30 p.m.)
MetroCenter, Plaz	za 1 Building, 220 Athens \	Nay, Suite 105,	Nashville, TN 37228
Contact Name/Title:			
Company Name:			
Address:	City:	S	tate: Zip:
Phone: ()	Fax: ()	
E-mail:			
Name of Sponsor, as it should			
Please Mail check with registration to: I Please Invoice Please Name as on the card: Card Number:	Expira	(Non-refundab DC 2017 Golf Class 20 Athens Way, Sui ISA MasterC	ic te 105, Nashville, TN 37228 ard American Express Security Code:
Cardholder Billing Address (as	ssociated with the card):		
Driver's License No.:			•
· ·	RCHARGE OF 1% ON ALL CREDIT CAI		
Foursome Information:			
Player 1:			
Player 3:	Player 4:		
Every participant will receive a	a TSMSDC and FedEx Mond	ogrammed Cap.	
☐ I cannot attend, but enclose	ed is my donation of \$		
$lue{}$ I will donate the following in	tem(s) for the Golf Classic:		
Description:		Value: :	\$