

3rd Annual

GOLF tournament

TEAM REGISTRATION FORM

TEAM LEADER NAME: _____

COMPANY NAME: _____

ADDRESS: _____

PHONE: _____ EMAIL: _____

BEST WAY TO CONTACT (CIRCLE): CALL TEXT EMAIL

2ND TEAM PLAYER: _____ EMAIL: _____

3RD TEAM PLAYER: _____ EMAIL: _____

4TH TEAM PLAYER: _____ EMAIL: _____

RETURN THIS FORM AND PAYMENT TO
DOUGLASS COMMUNITY SERVICES
711 GRAND AVE, HANNIBAL MO 63401

**OR EMAIL THIS FORM
AND ARRANGE PAYMENT:**
dcshannibal@gmail.com

**PLEASE INCLUDE YOUR
\$350 TEAM
REGISTRATION FEE
WITH YOUR FORM.**

\$20 Mulligans will be available for
purchase day of the event

GOT A QUESTION?
573-221-3892

Not a golfer or can't make it and want to donate?

SCAN THE CODE TO DONATE

