

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](mailto: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

