

Tournament Sponsorship

___ Platinum \$1000

___ Silver \$250

___ Gold \$500

___ Sponsorship \$200

Not Sending Players

Player Registration Package (Enter quantity)

___ \$100 per player

Total Amount \$ _____

Sponsor Name: _____

Sponsor Company: _____

Address: _____

Phone: _____

Email: _____

Pay by Credit Card: MC VISA AMEX DSC

Name on Card: _____

Card #: _____

Exp. Date: _____ Security Code: _____

Signature: _____

Please provide player information below:

1. _____

Email _____

2. _____

Email _____

3. _____

Email _____

4. _____

Email _____

Complete this form and mail to:

K of C Council 5052
2280 Springlake Rd., Ste. 100
Farmers Branch, TX 75234

Make checks payable to: K of C Council 5052

