



FOUNDATION TOURNAMENT

Thursday, August 15, 2019
Tee-Off: 8 a.m. & 1 p.m.

TEAM REGISTRATION

Company/Contact: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Telephone: _____ Fax: _____ Email: _____

4-person team entry fee is \$500 per team (space is limited)

Our payment is enclosed

Please bill us the entry fee and any additional cart fee.

Will you need a cart? (\$100 per cart) Yes No How many? _____

Tee-Off Time: 8 a.m. 1 p.m.

Team Participants:

1 _____ Shoe Size: _____

2 _____ Shoe Size: _____

3 _____ Shoe Size: _____

4 _____ Shoe Size: _____

Please return this form and/or sponsorship form by August 2, 2019

Checks payable to: Arkansas State Police Foundation
Mail: 219 W. Emerson, Paragould, AR 72450
Fax: (870) 240-0055
Email: neely.camp@fnbank.net