



Golf Tournament Registration Form

Contact Person: _____

Company: _____

Address: _____

City/Zip: _____

Phone: _____

How to Register:

If you have a team of 4 golfers, please list the individuals you wish to golf with below. Individual golfers are welcome and teams will be put together.

\$110 per player, must be received prior to the tournament. Registration includes an evening meal, two drink tickets and four raffle tickets.

ALL GOLFERS MUST PREPAY!

NAME	EMAIL	PHONE
Golfer 1		
Golfer 2		
Golfer 3		
Golfer 4		

PERSONAL CHECKS ONLY - MAKE PAYABLE TO NDLTCA/PAC

Please use this form as your billing invoice and send it with payment to:

NDLTCA/PAC Golf Tournament

1900 N 11th Street, Bismarck, ND 58501

COMPLETE AND RETURN REGISTRATION FORM BY APRIL 19, 2019!