



**3rd Annual Golf Tournament Benefitting the Single Parent Action Network  
Friday, April 25, 2008 at the Sherrill Park Golf Course**

# *Registration Form*

**Deadline to register is April 23, 2008**

Please list other golfers in your foursome or we will assign you team members.

We encourage all team members to register together to ensure assignments are correct.

**Golfer 1 (Name):** \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_ Email: \_\_\_\_\_

**Golfer 2 (Name):** \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_ Email: \_\_\_\_\_

**Golfer 3 (Name):** \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_ Email: \_\_\_\_\_

**Golfer 4 (Name):** \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_ Email: \_\_\_\_\_

**BBQ Dinner and Awards to follow Tournament**

**Invite your family to dinner - \$10/ person Kids under 12 eat free**

Number of Players \_\_\_\_\_ @\$100 each \$ \_\_\_\_\_

No. of Extra Dinners \_\_\_\_\_ @\$10 each No. of Kids (under 12) \_\_\_\_\_ \$ \_\_\_\_\_

Check  MasterCard  Visa  Amex Total: \$ \_\_\_\_\_

Credit Card # \_\_\_\_\_

Expiration Date: \_\_\_\_\_

Card Holder Name: \_\_\_\_\_

Please make checks payable to: FUMC (memo: MOF/Spain Golf Tournament)

Email to: disciplingmen@fumcr.com

Mail to: FUMCR, Attn: Pete Russell, 503 N. Central Expressway, Richardson, TX 75080