



registration form

Please RSVP by August 8

contact information

Name: _____
Company Name: _____
Address: _____
City, State, Zip: _____
E-Mail: _____
Phone: _____

sponsorship level

- Tournament Sponsor \$5,000
- Course sponsor \$3,500
- Dinner Sponsor \$3,000
- Lunch Sponsor \$2,000
- Eagle Sponsor \$1,250
- Birdie Sponsor \$600

individual golfer level

includes golf, lunch and dinner

- Friend of the Sabes JCC \$250
- Individual Golfer \$180

other options

- Dinner only (per person) \$40
- Sorry, I am unable to attend. I would like to support the Sabes JCC with a tax-deductible contribution. \$ _____

method of payment

___ Check enclosed (payable to Sabes JCC)
___ Credit Card (___ Visa ___ Mastercard)
Card #: _____
Exp. Date: _____
Name on Card: _____
Signature: _____

Return this form with payment to:

Sabes JCC: Golf
4330 S. Cedar Lake Road
Minneapolis, MN 55416

\$95 per golfer of your reservation is not tax-deductible.

I would like to be in a foursome with

Golfer 1 name: _____
Handicap: _____
Golfer 2 name: _____
Handicap: _____
Golfer 3 name: _____
Handicap: _____
Golfer 4 name: _____
Handicap: _____

- Best Ball
- Scramble
- Please assign me to a foursome

