



CHARITY GOLF TOURNAMENT 2017

Registration Form

Corporate Name: _____

Player Name: _____

Handicap: _____

Phone: _____

Email: _____

Address: _____

City: _____

State: _____

Zip: _____

Participation Level *(check one)*

Title ~ \$5,000.00 Provided by 

Platinum ~ \$2500.00

Gold ~ \$1200.00

Silver ~ \$600.00

Individual ~ \$150.00

Other Opportunities

Corporate Signage (\$250.00)

Family Signage (\$50.00)

Lunch Sponsor (\$750.00)

Lunch & Awards Ceremony for
Non-players (\$25.00/ea)

Schedule of Events

Breakfast/Check-In. 8:00 am

Shotgun Start. 9:00 am

Lunch & Awards. 2:00 pm
(approximately)

Playing Partners: Handicap:

Player 1 _____
Handicap: _____

Player 2 _____
Handicap: _____

Player 3 _____
Handicap: _____

Player 4 _____
Handicap: _____

Golf Shirts

The DSAJ will provide all participants with golf shirts at the tournament. Please provide shirt sizes.

Adult SM

Adult MED

Adult LG

Adult XL

Adult XXL

Payment Method

Sending Payment By Mail to:
DSAJ – 630 May St. Jacksonville, FL 32204

Paying On-line through PayPal