

Children's Community School's 6th Annual Golf Outing

Monday, May 20th, 2024 The Golf Club at Oxford Greens, Oxford

Player Registration Form

■ \$900 Foursome ■ \$250 Individual Player
Player 1: (Please provide additional golfer information for foursomes on back.)
Contact Name:
Official USGA Handicap or Best Estimate:
Business or Organization Name:
Address:
City: State: Zip:
Business Phone: Home/Cell Phone:
Email:
I am unable to attend, but enclose a tax-deductible gift of \$ in support of the Children's Community School of Waterbury.
Total Contribution: \$
Payment Method: Check VISA MasterCard Amex Discover
Card #: Exp. Date: CVV Code:
Signature: Date:

REMINDER FOR 2024: ALL SPONSOR AND PLAYER PAYMENTS MUST BE RECEIVED BY THE CHILDREN'S COMMUNITY SCHOOL PRIOR TO THE EVENT IN ORDER TO PARTICIPATE.

Additional Golfer Information

Player 2: Contact Name:	
Official USGA Handicap or Best Estimate:	
Business or Organization Name:	
Address:	
City: State:	Zip:
Business Phone:	Home/Cell Phone:
Email:	
Player 3: Contact Name:	
Official USGA Handicap or Best Estimate:	
Business or Organization Name:	
Address:	
City: State:	Zip:
Business Phone:	Home/Cell Phone:
Email:	
Player 4: Contact Name:	
Official USGA Handicap or Best Estimate:	
Business or Organization Name:	
Address:	
City: State:	Zip:
Business Phone:	Home/Cell Phone:
Email:	