

Golfer Registration Form

Company Name:		COST
		\$680/Foursome
Contact Name:		\$340/Twosome
Phone:		\$170/Person
Contact Email:		
		Total Enclosed: \$
Golfers Name(s) & Email		Please make checks payable to United Way of Will County
Golfer 1 Name:	Email:	
Golfer 2 Name:	Email:	
Golfer 3 Name:	Email:	
Golfer 4 Name:	Email:	