

**Golf Only Registration
Golf Hole Sponsorship**

**The Summit Golf Tournament
Tuesday, September 17, 2019**



Lakewood Golf Club
5910 Lakewood Dr.
Fairhope, AL 36532

Primary Contact _____ Title _____

Company _____

Address _____

City _____ State _____ Zip _____

Work Phone _____ Fax _____ Email _____

| GOLFER NAME: | Golf (\$150/person) | Golf Hole Sponsorship (\$100/hole) |
|----------------|--------------------------|---|
| _____ | <input type="checkbox"/> | <p>Number of holes to sponsor _____ X \$100</p> <p>Company name to appear on signage:</p> <p>_____</p> |
| _____ | <input type="checkbox"/> | |
| _____ | <input type="checkbox"/> | |
| _____ | <input type="checkbox"/> | |
| TOTALS: | _____ | |

Total Golfers X _____

Total Golf Hole Sponsorships X \$100 = _____

TOTAL DUE _____

Pay by check (Payable to ACTS) Mail to: PO Box 644, Conway AR 72033

Pay by credit card

Credit Card # _____ Exp. Date _____ Security Code _____

Name on card _____

Billing address (if different from above) _____

Charge will show as **ACTS NOW** on statement

For more information, visit www.alabama.damagepreventionsummit.com, call ACTS at 888-548-6363, or email thesummit@aligningchange.com.