



9th Annual Golf Tournament

Golf Registration Form

Saturday, July 15, 2023

Battle Creek Golf Course

Golf Registration Form - 4 Man Scramble – Starting at 1:00 pm

	NAME & EMAIL ADDRESS	Coat Size*	COST
PLAYER #1			\$ 130.00
PLAYER #2			\$ 260.00
PLAYER #3			\$ 390.00
PLAYER #4			\$ 500.00
Amount Enclosed			\$

***NEED COAT SIZING IN BY FRIDAY, JUNE 9TH**

Please Make Checks Payable To:
Leah's Dream Foundation
PO Box 602
Marysville, WA 98270

For more information, or to Pay Online visit:
www.leahsdream.org
Email – leahsdreamfoundation@gmail.com

Note: Registration forms need to be turned in two weeks prior to golf tournament so please have forms and payment by **Friday June 30th** or sooner if possible.

Leah's Dream Foundation is a registered 501(c) 3 organization. Tax ID number is 47-3943401