

———— TREC INTERNATIONAL-STAN SHERLIN ————
MEMORIAL GOLF TOURNAMENT

COMPANY/TEAM NAME: _____

1. NAME: _____ E-MAIL ADDRESS: _____

H/C _____ PHONE NUMBER: _____

2. NAME: _____ E-MAIL ADDRESS: _____

H/C _____ PHONE NUMBER: _____

3. NAME: _____ E-MAIL ADDRESS: _____

H/C _____ PHONE NUMBER: _____

4. NAME: _____ E-MAIL ADDRESS: _____

H/C _____ PHONE NUMBER: _____

PAYMENT

_____ GOLF FEES AT \$600/TEAM OR \$150 EACH \$ _____

_____ RAFFLE TICKETS AT \$10 EACH \$ _____

_____ DONATION TO MEDICAL CLINIC* \$ _____

*THIS GIFT IS TAX DEDUCTIBLE

TOTAL: \$ _____

PLEASE BILL MY MC/VISA

ENCLOSED IS A CHECK MADE PAYABLE TO
TREC INTERNATIONAL - P.O. BOX 242205, MONTGOMERY, AL 36124

CREDIT CARD NUMBER: _____ ZIP: _____ CCV: _____

NAME ON CARD: _____ EXP. DATE: _____

**TOURNAMENT FUNDS ARE NON-REFUNDABLE. IF PLAY MUST BE CANCELED DUE TO INCLEMENT WEATHER, A VOUCHER FOR LUNCH AND ONE ROUND OF GOLF AT WYNLAKES WILL BE PROVIDED.