



# SPECIAL OLYMPICS WISCONSIN GOLF CLASSIC

## REGISTRATION FORM

☐ Single Golfer \$250

☐ Foursome \$1,000

☐ Dinner Only \$100

Contact Name : \_\_\_\_\_

Company Name: \_\_\_\_\_

Address : \_\_\_\_\_

City, State, Zip Code : \_\_\_\_\_

Email: \_\_\_\_\_

☐ Check Enclosed - Amount \$\_\_\_\_\_

*Registration can also be completed online: <http://www.specialolympicswisconsin.org/events/sowi-golf-outing/>*

*Please make checks payable to Special Olympics Wisconsin and mail to:*

*Special Olympics WI - Golf Outing 10224 N. Port Washington Rd. Mequon, WI 53092.*

*If you are not registering online and would like to pay by credit card, please call the Special Olympics office at 262.241.7786*

Foursome Group Name: \_\_\_\_\_

Captain's Name: \_\_\_\_\_

Email: \_\_\_\_\_

Golfer #2 Name: \_\_\_\_\_

Email: \_\_\_\_\_

Golfer #3 Name: \_\_\_\_\_

Email: \_\_\_\_\_

Golfer #4 Name: \_\_\_\_\_

Email: \_\_\_\_\_