

Street Address:

Name:

City:



2023 Golf Tournament Entry Form

September 11, 2023

State:

Zip Code:

Contact Per	SUII				
Phone Number:				Date:	
Signature:					
Email:					
		Pleas	e select your preferred tee	time:	
		o Morning:	Check in 7:00 am	Shotgun 8:00 am	
		o Afternoon:	Check in 12:00 pm	Shotgun 1:00 pm	
		Cost per Individual G	Golfer: \$150 Cost	per Foursome: \$500	
Item	Quantity	Spon	sorship Package and/or	Foursome Names	Amount
	1	Please see Spo	onsorship Page for package	s and pricing	1
İ					
				TOTAL D	UE:

Please contact Vicki Azlin for more information at 901-726-6820

Please submit all entries to: EMAIL: azlin@alphaomegaveterans.org or FAX: 901-726-6882

Please make payments via website: alphaomegaveterasnservices.org
or mail directly to: 1183 Madison Avenue Memphis, TN 38104