

ENTRY FORM

_____ Team Name

_____ Contact Name

_____ Mailing Address

_____ City/State/Zip

_____ E-mail (required for account information)

Yes, I will be a:

_____ First and Ten \$125.00

_____ Touchdown \$600.00

Sponsorships:

_____ Long Drive Contest \$300.00

_____ Closest to the Pin \$300.00

_____ Individual Hole Sponsorship \$200.00

Total Amount enclosed \$ _____

GYF Tax ID: 93-0887878

Credit Card Payment

Visa MasterCard American Express Discover

Card # _____ CSC _____

Print Name _____ Expires _____

Signature _____

Make Checks payable to

Glencoe Youth Football, Inc.

Mail to:

Glencoe Youth Football, Inc.

PO Box 823

Hillsboro, OR 97123

Please contact me about:

_____ Volunteering for the Golf Tournament

_____ Donating a raffle or tournament prize.

TEAM MEMBERS

_____ Name

_____ Mailing Address

_____ City/State/Zip

_____ E-mail

_____ Name

_____ Mailing Address

_____ City/State/Zip

_____ E-mail

_____ Name

_____ Mailing Address

_____ City/State/Zip

_____ E-mail

_____ Name

_____ Mailing Address

_____ City/State/Zip

_____ E-mail



GLENCOE YOUTH FOOTBALL

17TH Annual GOLF TOURNAMENT

_____ at _____



ROCK CREEK COUNTRY CLUB

5100 NW Neakahnie Avenue

Portland, Oregon 97229

503-645-1115

Friday, September 20th 2019

