5th annual
KING'S DAUGHTERS GOLF TOURNAMENT

Benefiting
**The King's Daughters
Child Development Center**

LOCATION

Hermitage Golf Course
3939 Old Hickory Blvd.
Old Hickory, TN 37138
615.847.4001

*Course requires soft spike golf shoes

SCHEDULE

Monday, April 29, 2013

11:30 am   Lunch, Registration, Silent Auction
            Driving Range Open
1:00 pm   Shotgun Start
            Awards Reception Afterwards

FORMAT

- Four-person Scramble
- Men (Blue), Seniors 65+ (White) & Ladies (Red)
- Includes two (2) Mulligans per player
- Snacks and Beverages will be available during Play

FEES AND PRIZES

- $150 per person
- $600 per team
- Sponsorships Available

Entry Form on Reverse Side

REGISTRATION

Please complete the form below indicating your level of support and provide the information for each player:

_____ Gold Sponsor (includes one team of 4 players, logo on beverage cart and hole sponsorship)	$3000.00
_____ Silver Sponsor (includes hole sponsorship and one team of 4 players)	$1000.00
_____ Driving Range Sponsor	$500.00
_____ Hole Sponsor (deadline April 19)	$100.00
_____ Team Fee	$600.00
_____ Individual play fee includes two mulligans	$150.00
_____ No, I cannot attend, but I wish to contribute my tax-deductible gift to benefit the King's Daughters Day Home	$_____

DEADLINE FOR ENTRY IS FRIDAY, APRIL 19, 2013

TEAM ENTRY
Team Sponsor: _____

Address: _____

City: _____ State: _____ Zip:_____

Phone: _____ Fax: _____

Email: _____

Player #1: _____
Address: _____

City: _____ State: _____ Zip:_____

Phone: _____ Fax: _____

Email: _____

Player #2: _____
Address: _____

City: _____ State: _____ Zip:_____

Phone: _____ Fax: _____

Email: _____

Player #3: _____
Address: _____

City: _____ State: _____ Zip:_____

Phone: _____ Fax: _____

Email: _____

Player #4: _____
Address: _____

City: _____ State: _____ Zip:_____

Phone: _____ Fax: _____

Email: _____

INDIVIDUAL ENTRY
Name: _____

Address: _____

City: _____ State: _____ Zip:_____

Phone: _____

Handicap/Avg. 18 Hole Score: _____

(Player will be assigned to a team by Tournament Committee)

Total Amount Enclosed $_____

Card Number _____

Exp. Date _____

Billing address _____

Zip _____

Phone Number _____

Make checks payable to:
King's Daughters

Please return this form and payment to:
King's Daughters Child Development Center
590 North Dupont Avenue
Madison, TN 37115

For more information on:
The King's Daughters Golf Tournament
Call Candyee Goode at 865.5164

www.kdcdc.org

the King's Daughters
CHILD DEVELOPMENT CENTER