

**Golf Only Registration
Golf Sponsorship**



**The Summit Golf Tournament
Tuesday, January 15, 2019**

10955 N Mall Drive
Baton Rouge, LA 70809
12:00 A.M.

Primary Contact _____ Title _____

Company _____

Address _____

City _____ State _____ Zip _____

Work Phone _____ Fax _____ Email _____

<p>GOLFER NAME:</p> <p style="text-align: right;">Golf (\$85/person)</p> <p>_____ <input type="checkbox"/></p> <p>_____ <input type="checkbox"/></p> <p>_____ <input type="checkbox"/></p> <p>_____ <input type="checkbox"/></p> <p style="text-align: right;">TOTALS: _____</p>	<p style="text-align: center;">Golf Sponsorship (\$100/)</p> <p>Number to sponsor _____ X \$100</p> <p>Company name to appear on signage: _____</p>
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Total Golfers X \$85 = _____
Total Golf Sponsorships X \$100 = _____
TOTAL DUE _____

- Pay by check (Payable to ACTS) Mail to: PO Box 644, Conway AR 72033
- Pay by credit card (Enter information or register online at www.louisiana.damagepreventionsummit.com)

Credit Card # _____ Exp. Date _____ Security Code _____

Name on card _____

Billing address (if different from above) _____

Charge will show as **ACTS NOW** on statement

For more information, visit www.louisiana.damagepreventionsummit.com, call ACTS at 888-548-6363, or email thesummit@aligningchange.com.