Read the Greens GOLF CHALLENGE 2015
Benefitting Tutoring Chicago

Golfer Registration

First Name: _____Last Name:_____

Street Address:_____

City:_____State:_____Zip:_____

Cell Phone:_____Email: _____

Guests (This registration pays for these additional golfers)

First and Last Name of Guest:_____

First and Last Name of Guest:_____

First and Last Name of Guest:_____

Preferences

☐ Please assign me to a foursome
☐ I prefer to golf with my guests listed above
☐ I prefer to golf with the golfers listed below:
First and Last Name of Golfer_____

First and Last Name of Golfer:_____

First and Last Name of Golfer:_____

Fees Golf costs include 18 holes with a cart, lunch, cocktails and dinner at reception

☐ Single Golfer $350 ☐ Twosome $700 ☐ Foursome $1200

Payment
☐ Please mail this form along with a check made out to Tutoring Chicago.

☐ Pay with credit card. Name and Address should match the information above.
If not, please write below.
Card Number:_____Expires:_____3 digit code:_____

I authorize Tutoring Chicago to charge my card in the amount of $ _____
.
Authorized Signature:_____Date:_____

Please mail form and payment to Tutoring Chicago, 2145 N. Halsted St. Chicago, IL 60614
Fax or email with credit card info to 312-397-9141 or emcpartlin@tutoringchicago.org
Paper entries must be received by June 1st