



Annual District Convention Golf Tournament

Thursday, August 3, 2017

Wildcreek Golf Course, Championship Course
3500 Sullivan Lane, Sparks, NV 89431

From I-80 West merge right to Hwy 395/580 North exit N. McCarran Blvd.
Take a right at the exit light and travel through two traffic lights to Sullivan Lane.
Take a left onto Sullivan and the golf course will be your first right.

Tournament Entry Fee: \$80 per player and includes:

- Continental Breakfast
- Green Fee and Cart
- Practice Range Balls
- Cash Prize Contests: Closest-to-the-Pin, Longest Drive & Team Awards
- Rental Clubs available \$30/player

Check in & Breakfast:

7:00-7:30 a.m.

Shotgun Start: 8:00 a.m

Format: Best Ball Scramble* (4 person teams)

*Scramble team must include at least three Kiwanians to qualify for Perpetual Low Team Prize.

Dress code for all golfers is sleeved shirts, no denim/jeans and soft spikes only.

Individual players will be assigned to a foursome at check-in. Kiwanians and guests not attending the convention invited to play as well.

Sponsorship Opportunities:

Tee Signs: \$100 each

Contact Person: _____

Phone: _____

E-mail: _____

Tee sign wording: _____

For questions about sponsorships or for more information, please contact Ron Waicul at (775) 230-2287.



Player Information: Registration Deadline: July 21, 2017

1. _____ Amt. Paid \$ _____

Phone: _____ E-mail: _____

I will need transportation: Y N I can provide transportation: Y N

2. _____ Amt. Paid \$ _____

Phone: _____ E-mail: _____

I will need transportation: Y N I can provide transportation: Y N

3. _____ Amt. Paid \$ _____

Phone: _____ E-mail: _____

I will need transportation: Y N I can provide transportation: Y N

4. _____ Amt. Paid \$ _____

Phone: _____ E-mail: _____

I will need transportation: Y N I can provide transportation: Y N

Payment Information:

Number of Golfers _____ x \$80 = _____

Number of Tee Signs _____ x \$100 = _____

Number of Rental Clubs _____ x \$30 = _____

TOTAL: \$ _____ Acct. 21.416.20

If you wish to use your Visa, MC, Amex or Discover please complete the following:

Cardholder Name _____ Signature _____

Card Number

/

Expiration Date

Security Code*

*For AMEX customers, the security code is the 4 digit code located on the front of your card; For Visa, MC and Discover customers, it is the last 3 digits located on the back of your card.

Please provide the credit card **billing** address on the line below. Thank You.