

Ronald McDonald House Charities® of Augusta
2020 Red Shoe Golf Classic
Monday, August 31, 2029
West Lake Country Club



REGISTRATION FORM

Name: _____ Daytime Phone: _____

Company/Team Name: _____

Address: _____

City: _____ State: _____ Zip: _____ Email: _____

If you are registering a team, please list each team member's names & contact info.

Team Captain _____ HDCP* _____ Player 2 _____ HDCP* _____

E-mail _____ Shirt Size _____ E-mail _____ Shirt Size _____

Player 3 _____ HDCP* _____ Player 4 _____ HDCP* _____

E-mail _____ Shirt Size _____ E-mail _____ Shirt Size _____

*Maximum allowed handicap is 25 per player

Team handicap will be calculated by totaling individual handicaps and taking 10% of the total

\$312.50 for an individual registration for Golf Classic Monday, August 31st

\$1,250.00 for one foursome

Sponsorship Level: _____

Total: \$ _____

Charge my credit card

Name on Credit Card _____ Visa/MasterCard/Discover/AmEx (please circle)

Credit Card Number _____ Exp. Date _____ Zip Code _____

*Return registration form via fax or email with credit card information or mail with check payable to:

Ronald McDonald House Charities of Augusta
 1442 Harper Street * Augusta, GA 30901 * Office 706-724-5901 * Fax 706-722-0884
 For additional information email Chris Pence: CPence@rmhcaugusta.org