



REGISTRATION FORM

Links for Lupus Golf Tournament 2011

Save Time, Register Online: www.lupuslinks.org

**Please complete and return by August 19, 2011.
Be sure to include ALL contact information!**

YES! Sign me up to golf with a purpose!

	Level	Amount
<input type="checkbox"/> Tournament Title Sponsor	\$6,000	\$ _____
<input type="checkbox"/> Tournament Presenting Sponsor	\$3,000	\$ _____
<input type="checkbox"/> Gold Hole Sponsor	\$1,500	\$ _____
<input type="checkbox"/> Silver Tee Sponsor	\$1,250	\$ _____
<input type="checkbox"/> Bronze (Lunch or Dinner) Sponsor	\$1,000	\$ _____
<input type="checkbox"/> Hole Sponsor	\$ 500	\$ _____
<input type="checkbox"/> Foursome	\$ 600	\$ _____
<input type="checkbox"/> Individual	\$ 175 x _____ =	\$ _____

No. I can't join you, but I want to make a contribution to the Lupus Foundation.

- Tournament Patron \$ 250 \$ _____
- General Donation \$ _____

TOTAL AMT ENCLOSED: \$ _____



 I can donate a silent auction item or raffle prize—please contact me.

Donation Item(s) (ex: gift certificate, vacation package, etc.)



Contact Name

Company Name

Mailing Address

Email Address

Phone Number

Preferred Payment Method:

- Check is enclosed. Payable to *Lupus Foundation of America, Piedmont Chapter*
- Please bill me.
- VISA Mastercard American Express Discover Card

Credit Card Number

Expiration Date

Signature

COMPLETE FOURSOME INFORMATION ON BACK

FOURSOME INFORMATION

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LIST ALL CURRENTLY KNOWN FOURSOME INFORMATION.

Form can be submitted with incomplete information.

We will touch base with Team Contact prior to event for remaining player information.

Name of Player _____ Email _____ Handicap _____

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Name of Player _____ Email _____ Handicap _____

Name of Player _____ Email _____ Handicap _____



Additional Foursome

Name of Player _____ Email _____ Handicap _____

Name of Player _____ Email _____ Handicap _____

Name of Player _____ Email _____ Handicap _____

Name of Player _____ Email _____ Handicap _____



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MAIL OR FAX FORM TO:

LFA, Piedmont Chapter

4530 Park Road, Suite 302, Charlotte, NC 28209

FAX: (704) 716-5641

QUESTIONS: (704) 716-5640 • info@lupuslinks.org • www.lupuslinks.org