

# Registration

Please complete ALL sections for each additional team member.  
If applicable, please include company name sponsoring team:

Name 1 \_\_\_\_\_

Address \_\_\_\_\_

City/State/Zip \_\_\_\_\_

Phone \_\_\_\_\_

E-mail \_\_\_\_\_

Check  Cash  Visa  Mastercard

Acct # \_\_\_\_\_ Exp. \_\_\_/\_\_\_/ \_\_\_\_\_

Name 2 \_\_\_\_\_

Address \_\_\_\_\_

City/State/Zip \_\_\_\_\_

Phone \_\_\_\_\_

E-mail \_\_\_\_\_

Check  Cash  Visa  Mastercard

Acct # \_\_\_\_\_ Exp. \_\_\_/\_\_\_/ \_\_\_\_\_

Name 3 \_\_\_\_\_

Address \_\_\_\_\_

City/State/Zip \_\_\_\_\_

Phone \_\_\_\_\_

E-mail \_\_\_\_\_

Check  Cash  Visa  Mastercard

Acct # \_\_\_\_\_ Exp. \_\_\_/\_\_\_/ \_\_\_\_\_

Name 4 \_\_\_\_\_

Address \_\_\_\_\_

City/State/Zip \_\_\_\_\_

Phone \_\_\_\_\_

E-mail \_\_\_\_\_

Check  Cash  Visa  Mastercard

Acct # \_\_\_\_\_ Exp. \_\_\_/\_\_\_/ \_\_\_\_\_

# I'm signing up to be a Good Samaritan Golfer!

Entries must be received by Sept. 11, 2008

Single Entry, please assign me to a team

Entry fee \$150

Team Entry, (complete form on reverse)

Entry Fee \_\_\_\_\_ x \$150 = \_\_\_\_\_

Total enclosed \$

Checks should be payable to: Aberdeen Village

Please detach your registration form and return  
payment to:

Greater Kansas City Presbyterian

Manors Golf Classic

c/o Aberdeen Village

17500 W. 119th

Olathe, KS 66061

Phone: 931-599-6100

Directions to Falcon Lakes Golf course:

North of 1-70 on K-7 Hwy. Course on west

side of the road. Phone: (913) 724-4653

Please enclose full payment with registration.

Thank you.