



**GOLFER REGISTRATION - \$175 per golfer:**

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Email: \_\_\_\_\_ Handicap or Average Score: \_\_\_\_\_

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Email: \_\_\_\_\_ Handicap or Average Score: \_\_\_\_\_

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Email: \_\_\_\_\_ Handicap or Average Score: \_\_\_\_\_

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Email: \_\_\_\_\_ Handicap or Average Score: \_\_\_\_\_

Requested Golf Pairing (Every effort will be made to honor requests)

1. \_\_\_\_\_ 2. \_\_\_\_\_

3. \_\_\_\_\_ 4. \_\_\_\_\_

**SPONSORSHIP AND UNDERWRITING:**

Name: \_\_\_\_\_

Company: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Sponsorship/Underwriting Level \_\_\_\_\_ \$ \_\_\_\_\_

To pay online, go to - [golfshalom.givesmart.com](http://golfshalom.givesmart.com)

If paying by check, make checks payable to **Temple Shalom**

Amount to charge: \$ \_\_\_\_\_ [ ] MASTERCARD [ ] VISA [ ] AMEX

Card Number: \_\_\_\_\_ Expiration Date: \_\_\_\_\_ Security Code: \_\_\_\_\_

Name on Card: \_\_\_\_\_

Billing Address: \_\_\_\_\_

Signature: \_\_\_\_\_

***In the interest of everyone's health, we respectfully require all attendees to be vaccinated.***

Mail or email form to:

Irv Munn  
14180 Dallas Parkway, Suite 530  
Dallas, Texas 75254  
imunn@munnmorris.com

For information, contact Irwin Kaufman at 214-914-9333 or [irwin.kaufman@gmail.com](mailto:irwin.kaufman@gmail.com)  
Get event details at [www.forethekids.net](http://www.forethekids.net).