

TEMPLE UNIV SOCCER FRIENDS AND FAMILY GOLF OUTING



Benefitting Temple Men's Soccer - Applecross Country Club (484-692-1010)
Monday, May 11, 2015 - Registration and Lunch 11:30am - Shotgun Start 1pm

General Information:

Name _____

Address _____ Shirt Size _____

Phone _____ Email _____

Players

Player entry fees cover green fee, cart fee, range balls, lunch buffet, dinner buffet, on-course drinks, player participation bag and one raffle ticket.

___ I would like to register ___ player(s). Enclosed is my entry fee of \$150 per player.

___ I would like to register a team of four players. Enclosed is my entry fee of \$600 per team.

___ I would like to register my company as a team (four players) and a Hole Sponsor.

Enclosed is my entry fee of \$700 per company team and sponsorship.

Player Names: _____

___ I would like to purchase _____ "Owl Pass(es)" at \$25 per pass (An Owl Pass includes 2 mulligans, and five raffle tickets) ***Limit one pass per golfer***

Sponsorships

We hope you will consider sponsoring the TEMPLE UNIV SOCCER FRIENDS AND FAMILY GOLF OUTING. Check all that applies and please enclose your contribution with this form.

___ Meal Sponsor: \$350 ___ Beverage Sponsor \$250 ___ Hole Sponsor: \$100

___ I would like to make a contribution of _____ to help make this tournament a

All entry fees and contributions are tax-deductible within IRS restrictions.

Following the round of golf, a silent auction will take place during dinner. Items include: Temple Athletics Tickets. Philadelphia Sports Experiences. Golf Items. and much more!

Registrations due April 14, 2015

**Fill out this form with check payable to Temple University and send to:
Temple University Men's Soccer 1700 N. Broad St 4th floor Philadelphia PA 19122
To pay by credit card please use CC Authorization Form below**

Temple Univ Soccer Friends and Family Golf Tournament Official Donation Form

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Name of Business (if applicable): _____

Home Phone: _____ Office: _____

E-mail _____

Hole Sponsorship – Name of Business to be Displayed:

Description of the Item:

Value in Dollar Amount*: \$ _____

*Temple University reserves the right to assess the value of any donated item, as well as refuse a product or service. Your donations are tax deductible to the fullest extent of law. Please keep one copy of this document for your records.

Volunteer Solicitor's Name (if applicable): _____

Notes or special instructions regarding donation:

Please make checks payable to **Temple University Men's Soccer** with "soccer golf tournament" in the memo section. To Pay by Credit Card please use CC Authorization Form below.

Please send or fax completed form to:

Temple University Men's Soccer
1700 N. Broad Street, 4th floor
Philadelphia, PA 19122
Fax: 215-204-5254
E-mail: tusoccer@temple.edu
Phone: 215-204-8477

Temple University Men's Soccer
1700 N. Broad Street, 4th Floor
Philadelphia, PA 19122
Fax: 215-204-5254
Phone: 215-204-8477

Credit Card Authorization Form

Card Type: American Express Discover MasterCard Visa

Card Number: _____

Expiration Date: ____ / ____ / ____

Security Code: _____

Card Holder Name: _____

Billing Address: _____

City: _____

State: _____ Zip: _____

Phone Number: _____

Authorized Amount: _____

Signature: _____

Date: _____