

## Dawn of Hope Golf Classic Monday, April 30, 2018

Johnson City Country Club

# Sign-up Today! www.dawnofhope.com

For more information: Call: (423) 722-1689 - Email: lisapawley@dawnofhope.com - Visit: www.dawnofhope.com

WHEN: Monday, April 30, 2018

Registration & Breakfast 7:30am

Shotgun start at 8:30am

OR

Registration & Lunch 12:30pm

Shotgun start at 1:30pm

WHERE: Johnson City Country Club

ENTRY FEE: \$150 per person

Dawn Hope

(Includes cart, & green fees)

FORMAT: 2-person—Select Shot

Open Division & Co-Ed Division

PRIZES: ° Closest to the Pin ° Longest Drive

° Closest to the Line ° Putting Contest

\$10,000 HOLE-IN-ONE: TBD

COMMEMORATIVE POLO COURTESY OF:



FOOD & BEVERAGE SPONSORS:





**MEDIA SPONSORS:** 





#### - Silent Auction - Door Prizes - Goodie Bag -

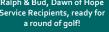
#### Thank you for your consideration!

Proceeds benefit more than 200 people with intellectual & developmental disabilities in Northeast Tennessee through the Developmental, Residential, Vocational & Health Programs at Dawn of Hope. These crucial Programs provide Person Centered Supports which include expert services to help people find jobs and be valued citizens of their communities while learning how to lead their own lives and

pursue their own dreams.











### Dawn of Hope Golf Classic Monday, April 30, 2018

Johnson City Country Club



Player/ Team Dign-up

When: Monday, April 30, 2018

Registration & Breakfast 7:30 a.m.

Shotgun start at 8:30 a.m.

Registration & Lunch 12:30 p.m.

Shotgun start at 1:30 p.m.

Where: Johnson City Country Club 1901 East Unaka Avenue

Johnson City, TN 37601

Entry Fee: \$150 per player

(Includes cart & green fees)

Format: 2-Person - Select Shot

(Card #)

(Exp.)

Open Division & Co-Ed Division

\$10,000 Hole-in-One Sponsor

**TBD** 

Complimentary: Commemorative Polo courtesy of



Food & Beverage Sponsors:







**Media Sponsors:** 



(Card #)

(Exp.)



(Billing Zip code) (CVW)

Pl	ayer Info	rmatio	n		
Player 1	,		layer 2		
Name		Name _			
Company		Company _			
Email		Email _			
Address		Address _			
City/State/Zip					
Phone		Phone _			d Tee Time
Polo Size Preferred T					
(s/m/l/xl/xxl) (8 Handicap (max 18)_	3:30am or 1:30pm)	(	s/m/l/xl/xxl) Handic		(8:30am or 1:30pm) .8)
Pair me with another player(Person to par	OR tner with)	Pair my team	with a speci	fic team	(Team to partner with)
*Please note: you m	nust register by April 15th	h to be guaranteed a	a polo in your s	size.	
Payment Method for Player 1		Payment Method	d for Player	2	
		Sponsorship Play			Check Enclosed to Dawn of Hope Foundation
Mail an Invoice	/Pal Invoice 🔲 🛮 🗈	Mail an Invoice		Email a	PayPal Invoice 🔲
Credit Card $\Box$	(	Credit Card $\Box$			

PLEASE COMPLETE THE INFORMATION ABOVE AND RETURN VIA:

(Billing Zip code) (CVW)

Email: lisapawley@dawnofhope.com Mail: Dawn of Hope Foundation, PO Box 30, Johnson City, TN 37605-0030