

# SMILES

Golf Classic 2011

## Registration Form

**Single Golfer** (\$125)  
Player Name: \_\_\_\_\_ Email: \_\_\_\_\_ Shirt: \_\_\_\_\_

**4 Person Team** (\$500)  
Captain Name: \_\_\_\_\_ Email: \_\_\_\_\_ Shirt: \_\_\_\_\_  
Player 2: \_\_\_\_\_ Email: \_\_\_\_\_ Shirt: \_\_\_\_\_  
Player 3: \_\_\_\_\_ Email: \_\_\_\_\_ Shirt: \_\_\_\_\_  
Player 4: \_\_\_\_\_ Email: \_\_\_\_\_ Shirt: \_\_\_\_\_

**Pin Sponsor** (\$200)  
Name as it appears on Flag: \_\_\_\_\_

**Hole Sponsor** (\$100)  
Name as it appears on Sign: \_\_\_\_\_

**Cash Donation** (Any Amount)  
Amount of donation: \_\_\_\_\_

## Sponsor Information

Name/Company Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Phone Number: \_\_\_\_\_ Email: \_\_\_\_\_

*Please complete this form and return it with payment to:*

**SMILES Golf Classic  
881 COUNTY ROAD 136  
SWEENY, TX 77480-4235**

*Please make checks payable to NFED (National Foundation for Ectodermal Dysplasias)*