



Telluride Adaptive Sports Program
11th Annual

Bob Miller Memorial Golf Classic

Thursday, September 17, 2007
9am Shotgun Start

REGISTRATION FORM

Team Sponsor/Team Name: _____

Contact Person: _____

Address: _____

City: _____ State: _____ Zip: _____

Home Phone: _____ Work Phone: _____

Email: _____

Select a Team Level:

- \$1,000 = 4 Tee Times, pick your players
- \$500 = 2 tee times, split team
- \$250 = 1 tee time, place me on a team
- \$ _____ = I can't play, but I'd like to make a donation

MULLIGANS
Purchase your Mulligans ahead of time....
\$50/person = 3 mulligans each
(team maximum is 12)
___ \$50 ___ \$100 ___ \$150 ___ \$200

Very Important
Box Lunch Order
Please be sure to indicate what
you would like for lunch!
V = Veggie, T = Turkey, R = Roast Beef

Player's Names	Address	Phone number	Handicap	Lunch choice

I'D ALSO LIKE TO BE A SPONSOR:

- Tournament Patron (\$5,000)
- Tournament Friend (\$2,500)
- Awards Party Sponsor (\$1,500)
- Corporate Sponsor-A-Hole (\$1,000)
(Call for special business benefits)
- Tournament Lunch Sponsor (\$1,000)
- 19th Hole Sponsor (\$500)
- Tee and Green Sponsor (\$250)

All sponsorships receive recognition at the venue and admission to the Awards Party and Silent Auction

Please mail your registration form and payment to:
TASP, P.O. Box 2254, Telluride, CO 81435 or Fax 970.728.3593

Make checks payable to TASP or enter credit card info:

I authorize TASP to charge my (circle one): Visa, Mastercard, or American Express card.

Card#: _____ Exp. Date: _____ Signature _____

(Discover card not accepted.)

Registration due by Wednesday, September 9th.
Please call 970.728.5010 or email tasp@tellurideadaptivesports.org with any questions!