

# Wayfield Foods

## 28th Annual Charity Golf Tournament

Wednesday, April 16th, 2025

PLEASE RETURN THIS FORM AS SOON AS POSSIBLE TO RESERVE YOUR SPOT!

Return to P.O Box 1370 ~ Lithia Springs, GA 30122 OR email Kedenfield@wayfieldfoods.com

Company Name & Address: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

### Sponsorships:

\_\_\_\_\_ Hole Sponsor \$600

\_\_\_\_\_ Longest Drive (includes hole sponsorship) \$1000

\_\_\_\_\_ Closest to Pin (includes hole sponsorship) \$1000

### Players:

\_\_\_\_\_ Register the names below as a team \$1000

\_\_\_\_\_ Register me as a single player (\$250) or twosome (\$500)  
and match me up with other golfers.

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

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

I would also like to purchase \_\_\_\_\_ Mulligans (max 2 per player) @\$10 each.

Total Amount Due \$ \_\_\_\_\_

Do you need us to send you an invoice? \_\_\_\_\_ YES or \_\_\_\_\_ NO

Check Enclosed

Change my [ ] Visa [ ] Master Card [ ] American Express

Account No.: \_\_\_\_\_ Exp: \_\_\_\_/\_\_\_\_ CVC No.: \_\_\_\_\_

Billing Zip Code: \_\_\_\_\_ Name on Card: \_\_\_\_\_

Signature: \_\_\_\_\_ (Please print to sign for authorization)