

# Special Wish Child, Inc.

4-Person Golf Team

\$500/team or \$125/person

	Player 1	Player 2
Name:		
Address:		
City:		
State/Zip:		
Phone:		
Email:		
Handicap:		

	Player 3	Player 4
Name:		
Address:		
City:		
State/Zip:		
Phone:		
Email:		
Handicap:		

Limited to the first 20, four-person teams. Teams are low gross and low net.

Team Captains: Please fax the team roster when your team is complete. If you need extra players, we will help fill your team. If you are a single/double, etc., please fax your information so we can place you on a team.

**Contact information:**

Sue Adams/Katie Heaton

Phone: 903-592-1000

Fax: 903-592-7715

Special Wish Child, Inc.

P.O. Box 10125

Tyler, TX 75711

Keith Hilliard

Phone: 903-533-8585

Thank you in advance for your participation!