



REGISTRATION INFORMATION

Entry Fee Enclosed

Platinum Sponsor at \$3,000 Includes 8 players	\$ _____
Gold Sponsor at \$1,500 Includes 4 players	\$ _____
Silver Sponsor at \$500 Includes 2 players	\$ _____
Individual Players at \$100	\$ _____
Hole Sponsor at \$200	\$ _____
Dinner and Auction \$25	\$ _____
Total Enclosed=	\$ _____

Donation Information

I will not be able to attend, but please accept my
Tax deductible donation of

\$ _____.

Payment Information

Please make checks payable to:

Amandalee Golf Classic

Mail to:
Moffitt Cancer Center Sarcoma Program
12902 Magnolia Drive
Tampa, FL 33612
Fax (813) 972-8337