REGISTRATION

Danny Williams Memorial Golf Tournament

FRIDAY, AUGUST 2, 2024

MT. HOOD GOLF CLUB

100 Slayton Road, Melrose, MA 781 665-6656

SCHEDULE

7:00 am..... Sign-in at the club house

8:00 am..... 18-hole scramble, shot gun start

~1:00 pm ..... Lunch buffet served following golf

Prizes and raffles after lunch

SPONSORS AND DONATIONS

Hole sponsors..... $200. per hole
Name / advertisement on tee box

Raffle prize donations will be greatly appreciated.

NOT A GOLFER?

Join us for lunch...$45.

REGISTRATION INFORMATION

$175. per player
Includes golf, carts, and lunch

Please return the Registration Form with payment for all golfers by July 1, 2024.
Players may register individually or as a team.
Singles / doubles will be assigned to a team.

144 PLAYER MAXIMUM
Registrations with payment will be accepted in the order in which we receive them.

Additional information and registration forms can be found on the web site.

www.dannywilliamsgolf.org

REGISTRATION FORM

Please provide complete information for every player you are registering. Additional information and updates may be sent via email, so be sure to include each player's email address.

THE 2024 GOLF TOURNAMENT HAS FILLED!

WE ARE SO GRATEFUL FOR THE CONTINUED ENTHUSIASM FOR DANNY'S TOURNAMENT.

IF YOU DIDN'T MAKE IT THIS YEAR, WE HOPE YOU CAN GOLF NEXT TIME.

(LUNCH GUESTS CAN STILL REGISTER!)

PLAYER #1 / PRIMARY CONTACT:

Name _____

Street Address _____

City/State/Zip _____

Email _____

PLAYER #2

Name _____

Street Address _____

City/State/Zip _____

Email _____

PLAYER #3

Name _____

Street Address _____

City/State/Zip _____

Email _____

PLAYER #4

Name _____

Street Address _____

City/State/Zip _____

Email _____

PAYMENT

Player: (golf, cart, lunch): $175. ea..... $_____

Lunch Guest: $45. ea ..... $_____

Donor: I am unable to attend, but
I would like to make a contribution ..... $_____

Hole Sponsor: $200. per hole..... $_____

HOLE SPONSOR

Name _____

Street Address _____

City/State/Zip _____

Phone ( ) _____

Email _____

Please check the appropriate box to indicate what you would like on your sponsorship sign:

☐ I will email my camera-ready logo or complete advertisement to info@dannywilliamsgolf.org

☐ Please display the following on sign:

_____

_____

Payment enclosed **Total $**_____

Please make all checks made payable to:
Danny Williams Memorial Golf Tournament

RETURN WITH PAYMENT BY JULY 1, 2024:
Danny Williams Golf Tournament Committee
c/o The Williams family
31 Hesseltine Ave
Melrose, MA 02176

QUESTIONS?

Send an email to info@dannywilliamsgolf.org
(Photocopies of this form may be used.)