

Hanging Rock Christian Assembly, Inc.
Fall Golf Scramble 2021
Registration Form

\$65.00 per person. To confirm your spot in the tournament, the camp *MUST* have your *COMPLETED* registration and fee paid in full prior to the event.

1. Name _____ Phone _____ E-mail _____
Mailing Address _____ City/State/Zip _____ Age _____
Church _____ City _____

2. Name _____ Phone _____ E-mail _____
Mailing Address _____ City/State/Zip _____ Age _____
Church _____ City _____

3. Name _____ Phone _____ E-mail _____
Mailing Address _____ City/State/Zip _____ Age _____
Church _____ City _____

4. Name _____ Phone _____ E-mail _____
Mailing Address _____ City/State/Zip _____ Age _____
Church _____ City _____

Hole Sponsorship Information: Cost .. \$300.00

Name of business, individual, or church: _____

Mailing address: _____

Phone: _____

Mail form and registration fee to *HRCA, PO Box 218, West Lebanon, IN 47991-0218.*