



DEFENDING FREEDOM WARRIOR WEEKEND



REGISTRATION FORM

Please fill out the form below and mail it, along with your payment, to the following address:

Defending Freedom Weekend
1320 E International Speedway Blvd., Suite 1
Deland, FL 32724
Fax form to: 386-736-3899

PLAYER INFORMATION

Name: _____ Phone: _____ Handicap: _____

Email Address: _____

Name: _____ Phone: _____ Handicap: _____

Email Address: _____

Name: _____ Phone: _____ Handicap: _____

Email Address: _____

Name: _____ Phone: _____ Handicap: _____

Email Address: _____

_____ **Yes, it will be my honor to host a Wounded Warrior in my foursome to create a fivesome.**

SPONSORSHIP INFORMATION

Indicate your preference by marking the line next to your desired sponsorship opportunity:

Company Name: _____	Battalion Sponsor	\$5,000	_____
Contact Name: _____	Company Sponsor	\$2,500	_____
Address: _____ _____	Platoon Sponsor	\$1,500	_____
	Putting Contest Sponsor	\$1,000	_____
Phone: _____	Driving Range Sponsor	\$1,000	_____
	Beverage Cart Sponsor	\$500	_____
Email: _____	Holesome Sponsor	\$500	_____
	Hole Sponsor	\$250	_____
	Supporter Sponsor	\$75	_____
	Wristband Sponsor	\$20	_____

Please print information exactly as it should appear on signage: _____

PAYMENT INFORMATION

\$125 per player or \$400 per foursome (includes sponsorship of a Wounded Warrior or Active Duty Military player)

Amount Enclosed: \$ _____ Checks payable to: Complete Parachute Solutions

_____ American Express _____ Master Card _____ Visa

Account # _____

Expiration Date: _____

Signature: _____

Address: _____