## KIWANIS CLUB OF THE VIRGINIA BEACH-COMBERS 21st ANNUAL 'CHIPPING IN FOR CHILDREN' **CHARITY GOLF TOURNAMENT**



Wednesday, September 20, 2017 Check-in: 11:00 AM



## "PLAYER ENTRY FORM"

PLEASE MAIL THIS ENTRY FORM NO LATER THAN SEPTEMBER 12th, AS WE ARE REQUIRED TO ALERT GATE SECURITY. IF YOUR FORM ARRIVES LATE, WE HAVE TO SEND SOMEONE TO THE GATE TO IDENTIFY YOU. THANK YOU FOR UNDERSTANDING.

| (INCLUDES. Greens ree  | Cart ~ Lunch ~ Goody                       | r person<br>bag ~ Free Practic                   |                    |             | to Win Prizes)  |   |
|--|--|--|--------------------|-------------|-----------------|---|
| VEHICLES OWNED BY MILITARY norma  CIVILIAN VEHICLES & NON-MILITA | ally would at <u>any gate</u> , with drive | er and all passengers of<br>Gate 3 off Shore Dri | fering a picture I | D card.     |                 | е |
|  | , call Don Super, our Ba                   | se Security Liaison                              | n. (Cell: 757      | -717-5107.) | to Golf Course. |   |
| PLEAS  1. Last Name:   | SE PRINT LEGIBLY AND  First Name:          |  |                    |             |                 |   |
| - TEAM CAPTAI  |  |  |                    |             |                 |   |
| Address:   |  |  |                    |             |                 |   |
| Military?   Yes,   No  |  |  |                    |             |                 |   |
| 2. Last Name:  | , First Name:                              |  | Email:             |             |                 |   |
| Driver's Lic. #:   |  | State Issued:                                    | Tel:               |             |                 |   |
| Address:   | City:                                      |  |                    | State:      | Zip:            |   |
| Military?   Yes,   No  |  |  |                    |             |                 |   |
| 3. Last Name:  | , First Name:                              |  | Email:             |             |                 |   |
| Driver's Lic. #:   | A seguin                                   | State Issued:                                    | Tel:               |             |                 |   |
| Address:   | City:                                      |  |                    | _ State:    | Zip:            |   |
|  |  |  |                    |             |                 |   |
| Military? □ Yes, □ No  |  |  | Email:             |             |                 |   |
| Military? □ Yes, □ No<br>4. Last Name:                           | , First Name:                              |  |                    |             |                 |   |
|  |  |  | Tel:               |             |                 | _ |

Make check(s) payable to: "Kiwanis Virginia Beach-Combers." Mail this original Entry Form, with check(s) to: Nils Bahringer - 2832 Charlemagne Dr. - Va. Beach, VA, 23451 - Questions? 757-412-0238

| <b>Your Kiwanis</b> | Virginia Beach-Combers Contact is: |  |
|---------------------|------------------------------------|--|
|                     |                                    |  |