



Monday, August 4th 2025
12:00pm Registration 1:00 pm Shotgun Start

CONTACT NAME: _____

ADDRESS: _____

PHONE: _____ EMAIL: _____

Golfer Information —\$120 per golfer 12:00 Registration 1:00 pm Shotgun Start

NAME: _____

NAME: _____

NAME: _____

NAME: _____

Number of Golfers from above: _____ X \$120

Number of additional dinner guests: _____ X \$50

Tee Sponsor: _____ X \$100

Cart Sponsorship: _____ X \$25

TOTAL ENCLOSED: _____

Please provide payment to Kinderwood, LTD.

Mail this form with payment to: Kinderwood PO Box 255, Old Forge, NY 13420