



# Frankie Lemmon GOLF CLASSIC

## 2022 Team Registration Form

### Team Information

#### Team Member #1

Name: \_\_\_\_\_ HDCP: \_\_\_\_\_

Email: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

#### Team Member #2

Name: \_\_\_\_\_ HDCP: \_\_\_\_\_

Email: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

#### Team Member #3

Name: \_\_\_\_\_ HDCP: \_\_\_\_\_

Email: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

#### Team Member #4

Name: \_\_\_\_\_ HDCP: \_\_\_\_\_

Email: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

### Payment Information

Your Name: \_\_\_\_\_ Title: \_\_\_\_\_

Company: \_\_\_\_\_

Company Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Email: \_\_\_\_\_ Telephone: \_\_\_\_\_

**Team Cost - \$2,000.00**

- Please invoice me
- Check enclosed (*payable to Frankie Lemmon Foundation*)
- Or pay via Credit Card using this convenient pay link:

[Frankie Lemmon Golf Classic Payments](#)

All tournament proceeds benefit:



**Frankie  
Lemmon  
School &  
DEVELOPMENTAL  
CENTER**