



COUNT ME IN!
Organization Contact Form
Simply complete and return via e-mail or fax!
Tournament Dates - June 22-28, 2009

Organization:		Taxpayer ID:			
Main Contact:					
Title:		E-mail:			
Phone:		Cell:		Fax:	
Mailing Address: Please provide a physical address.		City:		State/Zip:	

This contact will receive all TICKETS Fore CHARITY e-mails, correspondence, and check distribution.

Alternate Contact:					
Title:		E-mail:			
Phone:		Cell:		Fax:	
Mailing Address: Please provide a physical address.		City:		State/Zip:	

This contact will receive all TICKETS Fore CHARITY e-mails, correspondence, and check distribution.

Please return via e-mail to cmclain@mneelysports.com
or fax (304) 842-4323.
Thank You!