

Signature

WILDCAT GOLF COURSE | 12000 ALMEDA ROAD • HOUSTON, TEXAS • WWW.WILDCATGOLFCLUB.COM

\$350 INDIVIDUAL | \$1,250 TEAM (4 PLAYERS)

PLEASE SEND COMPLETED FORM & PAYMENT TO YOUR JAMIE'S HOPE REPRESENTATIVE OR MAIL TO:

JAMIE'S HOPE FOUNDATION, 5858 WESTHEIMER ROAD, SUITE 708, HOUSTON, TX 77057

Payment & Registration must be received no later than April 15, 2015

GOLF TOURNAMENT PLAYER REGISTRATION INCLUDES | GREEN FEES, CART RENTAL, BREAKFAST, SNACKS ON THE COURSE, DINNER, ADULT & NON-ALCOHOLIC BEVERAGES, ENTRY TO SELECT CONTESTS, UNLIMITED RANGE BALLS, ACCESS TO THE 19TH HOLE LOUNGE.

| PLAYER PACKAGES (check those that apply) | | COST | QTY | TOTAL |
|---|--|---------|-----|-------|
| | FOURSOME | \$1,250 | | \$ |
| | INDIVIDUAL | \$350 | | \$ |
| | SUPER TICKET FOURSOME PKG (3 Mulligans* per Player) | \$100 | | \$ |
| | SUPER TICKET INDIVIDUAL PKG (3 Mulligans*) | \$25 | | \$ |
| | HELICOPTER BALL DROP FOURSOME PKG (1 Ball* per Player) | \$100 | | \$ |
| *Mulligans will be \$10 each at the Tournament *Helicopter Balls will be \$50 each or 3 for \$100 at the Tournament | | | | \$ |

| GOLFER I (LEADER) | NAME | COMPANY NAME |
|---|---|---|
| GOLFER 2 | Name Phone Email | |
| GOLFER 3 | Name Phone Email | |
| GOLFER 4 | NAME Phone Email | Issue Receipt To: Company Contact |
| | THOD: \Box Check CK# \Box Credit Card | |
| CREDIT CARE | INFO TYPE CREDIT CARD # | EXP/ CVV |
| NAME ON CAP | RDSIGNATUR | E DATE |
| | a completed and score-able golf tournament. If a cancellation does occur, Jamie's He | impossible to start and/or complete the tournament due to adverse weather conditions. Completion of 9 holes by all pe will attempt to reschedule. If this is not possible, participants will receive golf certificates to Wildcat Golf Club |
| Event") on their own ac and do hereby assume r specifically foreseeable and the above participa officers, employees, me | ccord. All participants give this acknowledgement freely and knowingly and I repres esponsibility for their own well-being. Participants are fully aware that possible ph of any injuries, including death, damages or loss regardless of severity, which they nts hereby waive any and all rights or claims they may have as a result of participa mbers, staff, and all individuals assisting in instructing, sponsoring and conducting I | the above mentioned are participating in the Jamie's Hope Golf Tournament for a Cure Sport Event ("Sport ent and warrant to you that said participants are physically and mentally fit and that, as a result, able to participate, ysical injury might occur as a result of participation, and agree to assume the full risk, including risk which is not may sustain as a result of participating in any and all activities connected with or associated with the Sport Event ion in the Sport Event against the Jamie's Hope Foundation , Wildcat Golf Club , and their respective directors, hese activities. Participants hereby fully release and discharge the Jamie's Hope Foundation , Wildcat Golf Club my heirs arising out of or in any way connected with participation in the Sports Event. |

Printed Name Date Submitted

If you have any questions or concerns please contact Amanda Abiassi: (C) 281-705-9505 or (E) Amanda@JamiesHope.org Jamie's Hope, a 501(c)3 charitable organization. Donations are tax-deductible to the extent allowed by law. EIN:45-5475611