



cvcpennstate.org

24th Annual

# COACHES VS. CANCER OF PENN STATE

## GOLF TOURNAMENT

MAY 28-29, 2020

event held rain or shine



# GOLF TEAM DETAILS FORM

Team Name: \_\_\_\_\_

**SPONSORSHIP  
DEADLINE:  
MAY 10, 2020**

Presenting Sponsor:



\*Choose one: \_\_\_ We prefer the 7:00 am starting time.  
\_\_\_ We prefer the 12:30 pm starting time.

*\*We will attempt to accommodate all requests, however priority times will be granted on a first come first serve basis and according to Sponsorship Level. Your preference is not guaranteed. However, we will notify you if your request cannot be fulfilled.*

1. Name: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
 Day Phone: \_\_\_\_\_  
 E-Mail: \_\_\_\_\_  
 Golf Club: \_\_\_\_\_  
 Affiliation: \_\_\_\_\_  
 Club Phone: \_\_\_\_\_ USGA Handicap: \_\_\_\_\_  
 Please indicate shirt size: \_\_\_ Small \_\_\_ Medium \_\_\_ Large \_\_\_ X-Large \_\_\_ XX-Large \_\_\_ XXX-Large  
 Please indicate if you will be attending the following events:  
 I will attend the Thursday Night Reception at Medlar Field at Lubrano Park: May 28th – 6:30 pm.  
 I will attend the Golf Awards Dinner on Friday evening at the Mount Nittany Club at Beaver Stadium: May 29th – 6:30 pm.

2. Name: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
 Day Phone: \_\_\_\_\_  
 E-Mail: \_\_\_\_\_  
 Golf Club: \_\_\_\_\_  
 Affiliation: \_\_\_\_\_  
 Club Phone: \_\_\_\_\_ USGA Handicap: \_\_\_\_\_  
 Please indicate shirt size: \_\_\_ Small \_\_\_ Medium \_\_\_ Large \_\_\_ X-Large \_\_\_ XX-Large \_\_\_ XXX-Large  
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3. Name: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
 Day Phone: \_\_\_\_\_  
 E-Mail: \_\_\_\_\_  
 Golf Club: \_\_\_\_\_  
 Affiliation: \_\_\_\_\_  
 Club Phone: \_\_\_\_\_ USGA Handicap: \_\_\_\_\_  
 Please indicate shirt size: \_\_\_ Small \_\_\_ Medium \_\_\_ Large \_\_\_ X-Large \_\_\_ XX-Large \_\_\_ XXX-Large  
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4. Name: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
 Day Phone: \_\_\_\_\_  
 E-Mail: \_\_\_\_\_  
 Golf Club: \_\_\_\_\_  
 Affiliation: \_\_\_\_\_  
 Club Phone: \_\_\_\_\_ USGA Handicap: \_\_\_\_\_  
 Please indicate shirt size: \_\_\_ Small \_\_\_ Medium \_\_\_ Large \_\_\_ X-Large \_\_\_ XX-Large \_\_\_ XXX-Large  
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