

# GOLFER REGISTRATION FORM

## **Loving Hearts Caring Hands 2nd Annual Golf Tournament**

### **BlackHorse Golf Club**

12205 Fry Road Cypress, Texas 77433

benefiting

The University of Texas M. D. Anderson Cancer Center

Department of Chaplaincy and Pastoral Education



**Golf Tournament: Monday, November 12<sup>th</sup>**

**9:00 AM Shotgun Start**

**7:30 AM Registration & Breakfast - 1:30 PM Lunch & Awards**

**Registration Deadline: Thursday, November 8, 2007**

Golfer Name	Handicap	Company Name
Address		Phone
City, State, Zip		Email address

Golfer Name	Handicap	Company Name
Address		Phone
City, State, Zip		Email address

Golfer Name	Handicap	Company Name
Address		Phone
City, State, Zip		Email address

Golfer Name	Handicap	Company Name
Address		Phone
City, State, Zip		Email address

MasterCard, Visa or AmEx Accepted  
Checks Payable To: Chaplaincy Fund, Inc.  
Return Form(s) & Payment to:

The Chaplaincy Fund, Inc  
Attn: Gloria Koenning  
PO Box 691284  
Houston, Texas 77269-1284

For More Information Contact:

Gloria Koenning  
713-862-8482  
Fax 281-897-0467  
gkoenning@chaplaincyfund.org

Donation Levels: \$1000/Foursome or \$250/ Individual  
Corporate sponsorships available

Additional Information & Forms Available on [www.chaplaincyfund.org](http://www.chaplaincyfund.org)

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