

# 20TH ANNUAL BLUE OX CHAPTER GOLF OUTING

To Benefit Chapter Initiatives

## Wednesday, August 28th, 2019

UAW Black Lake Golf Club

2800 Maxon Road, Onaway, MI 49765



**9:30 A.M. — Registration — Coffee & Donuts**  
**10:30 A.M. — Shotgun Start — Scramble**  
**\$100 per person**  
 (Includes 18 holes of golf, cart, box lunch, NY Strip steak dinner, & 2 drink tickets)

**RAFFLE TICKETS/SKILL HOLE CONTEST**  
**WE ARE ASKING CUs/VENDORS TO PLEASE BRING PRIZES FOR THE RAFFLE**  
**MEN & WOMEN: LONGEST DRIVE/CLOSEST TO THE PIN/LONGEST PUTT/BEST & WORST TEAM SCORES**

**Reservation Deadline is Wednesday, August 21st, 2019**

CU OR Company: \_\_\_\_\_ E-Mail Address: \_\_\_\_\_

Contact Person: \_\_\_\_\_ Phone: \_\_\_\_\_

**Payment/Sponsorship Information**

- Individual Golfer.....\$100.00
- Dinner Only.....\$ 40.00
- Dinner Sponsor..... \$500.00
- Lunch Sponsor..... \$350.00
- Drink Ticket Sponsor.....\$350.00
- Breakfast Sponsor.....\$250.00

- Golf Ball Sponsor.....\$200.00
- Hole Sponsor.....\$150.00
- We'd also like to donate the following door prize or items to be included in the golfer's goodie bags:  
 \_\_\_\_\_
- I am unable to attend but wish to donate:  
 \$ \_\_\_\_\_

**Team One**

- 1 \_\_\_\_\_
- 2 \_\_\_\_\_
- 3 \_\_\_\_\_
- 4 \_\_\_\_\_

**Team Two**

- 1 \_\_\_\_\_
- 2 \_\_\_\_\_
- 3 \_\_\_\_\_
- 4 \_\_\_\_\_

# of Participants \_\_\_\_\_ x \$100/person = \$ \_\_\_\_\_  
 + Sponsorships = \$ \_\_\_\_\_  
 Total enclosed: \$ \_\_\_\_\_

**If you have any questions, please contact Scott Pauly at 989-370-7213 or spauly@awakonfcu.net**

**Payment Information:**

- Check enclosed made payable to: **Blue Ox Chapter** and mailed to the Attn: Scott Pauly, Awakon FCU, PO Box 420, Onaway, MI 49765
- Credit/Debit Card (E-mail form to [spauly@awakonfcu.net](mailto:spauly@awakonfcu.net) or fax to 989-733-5777)

Statement will show Awakon Federal Credit Union as the merchant. Awakon accepts: Visa, Mastercard, Discover, & American Express

Card Number: \_\_\_\_\_ Exp. Date: \_\_\_\_\_ / \_\_\_\_\_ CVV Code: \_\_\_\_\_ Total Amount: \_\_\_\_\_

Name on Card: \_\_\_\_\_ Billing Address: \_\_\_\_\_

Email for Receipt: \_\_\_\_\_ Signature: \_\_\_\_\_