



# 15th Anniversary Atlanta Golf Classic

We're Hoping to Play  
 Rescheduled Golf Outing  
 November 23, 2009  
 Golf Club at Bradshaw Farm

## Please Sign me Up!

- I will arrange my own foursome
- Please arrange a foursome for me

### Player One

Name: \_\_\_\_\_  
 Company: \_\_\_\_\_  
 Church (if applicable): \_\_\_\_\_  
 Address: \_\_\_\_\_  
 City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP: \_\_\_\_\_  
 Phone: \_\_\_\_\_  
 E-Mail: \_\_\_\_\_  
 \_\_\_\_\_ Current handicap or average score for 18 holes

### Player Two

Name: \_\_\_\_\_  
 Company: \_\_\_\_\_  
 Church (if applicable): \_\_\_\_\_  
 Address: \_\_\_\_\_  
 City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP: \_\_\_\_\_  
 Phone: \_\_\_\_\_  
 E-Mail: \_\_\_\_\_  
 \_\_\_\_\_ Current handicap or average score for 18 holes

### Player Three

Name: \_\_\_\_\_  
 Company: \_\_\_\_\_  
 Church (if applicable): \_\_\_\_\_  
 Address: \_\_\_\_\_  
 City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP: \_\_\_\_\_  
 Phone: \_\_\_\_\_  
 E-Mail: \_\_\_\_\_  
 \_\_\_\_\_ Current handicap or average score for 18 holes

### Player Four

Name: \_\_\_\_\_  
 Company: \_\_\_\_\_  
 Church (if applicable): \_\_\_\_\_  
 Address: \_\_\_\_\_  
 City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP: \_\_\_\_\_  
 Phone: \_\_\_\_\_  
 E-Mail: \_\_\_\_\_  
 \_\_\_\_\_ Current handicap or average score for 18 holes

## Please copy this form for additional players!

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Make Checks payable to: **Lutheran Services of Georgia**  
 Credit Card: Circle one: Visa / MasterCard  
 Card number: \_\_\_\_\_  
 Expiration Date \_\_\_\_\_ V Code \_\_\_\_\_  
 Signature \_\_\_\_\_

Total Amount \$ \_\_\_\_\_

Please enclose your payment and mail this form to:

**Lutheran Services of Georgia**  
 1330 West Peachtree St, Ste 300  
 Atlanta, GA 30309-2943