



2022 Ron Huckabee Memorial Golf Tournament Registration

Check one:

- Enclosed is my check for \$8,000 and my team is listed below. (Please provide each player's information.)
- I paid a pre-registration fee of \$1,000. Enclosed is the remaining balance of _____.
- Enclosed are my team members' checks for \$2,000 each and my team is listed below. (Please provide each player's information as well as the team captain.)
- I won't be able to participate this year. Enclosed is my tax-deductible donation of _____ for a great cause.

Team Captain

Name _____

Handicap _____ Golf shirt size _____

Preferred method of contact: Phone _____ Email _____

Will a spouse/guest be attending? (Circle one) Yes No

Player 2

Name _____

Handicap _____ Golf shirt size _____

Preferred method of contact: Phone _____ Email _____

Will a spouse/guest be attending? (Circle one) Yes No

Player 3

Name _____

Handicap _____ Golf shirt size _____

Preferred method of contact: Phone _____ Email _____

Will a spouse/guest be attending? (Circle one) Yes No

Player 4

Name _____

Handicap _____ Golf shirt size _____

Preferred method of contact: Phone _____ Email _____

Will a spouse/guest be attending? (Circle one) Yes No

**Mail this form and your check to: The Life Center/RHM Golf
2101 W. Wall Street
Midland, Texas 79701**