



# 19<sup>th</sup> Annual KCFY 108 Hole Golf Marathon Pledge Form

Golfer's Name: \_\_\_\_\_

Sponsor Name: \_\_\_\_\_

Flat Amount: \$ \_\_\_\_\_

Sponsor Address: \_\_\_\_\_

- OR -

City, State, Zip: \_\_\_\_\_

Amount per hole: \$ \_\_\_\_\_

Sponsor Phone #: \_\_\_\_\_

Paid: Yes \_\_\_ or No \_\_\_

Sponsor Name: \_\_\_\_\_

Flat Amount: \$ \_\_\_\_\_

Sponsor Address: \_\_\_\_\_

- OR -

City, State, Zip: \_\_\_\_\_

Amount per hole: \$ \_\_\_\_\_

Sponsor Phone #: \_\_\_\_\_

Paid: Yes \_\_\_ or No \_\_\_

Sponsor Name: \_\_\_\_\_

Flat Amount: \$ \_\_\_\_\_

Sponsor Address: \_\_\_\_\_

- OR -

City, State, Zip: \_\_\_\_\_

Amount per hole: \$ \_\_\_\_\_

Sponsor Phone #: \_\_\_\_\_

Paid: Yes \_\_\_ or No \_\_\_

Sponsor Name: \_\_\_\_\_

Flat Amount: \$ \_\_\_\_\_

Sponsor Address: \_\_\_\_\_

- OR -

City, State, Zip: \_\_\_\_\_

Amount per hole: \$ \_\_\_\_\_

Sponsor Phone #: \_\_\_\_\_

Paid: Yes \_\_\_ or No \_\_\_

Sponsor Name: \_\_\_\_\_

Flat Amount: \$ \_\_\_\_\_

Sponsor Address: \_\_\_\_\_

- OR -

City, State, Zip: \_\_\_\_\_

Amount per hole: \$ \_\_\_\_\_

Sponsor Phone #: \_\_\_\_\_

Paid: Yes \_\_\_ or No \_\_\_