

# Central Christian Academy

## 14<sup>th</sup> Annual Charity Golf Tournament

**What:** This is a fundraiser to offset low tuition costs for lower to middle income families.

**When:** Friday, April 6, 2018

**Time:** Registration: 12:00 p.m.  
Lunch/Practice: 12:00 – 1:30  
Shotgun Start: 1:30 p.m.

Dinner/Awards

**Format:** 4-person Florida scramble shotgun start. Meal followed by awards presented upon completion of tournament, after all scores are tallied. Prizes for 1<sup>st</sup>, 2<sup>nd</sup> & 3<sup>rd</sup> place.

**Where:** Longwood Golf Course  
13300 Longwood Trace  
Cypress, TX 77429  
281-373-4100

**Entry Fee:** \$550.00 / 4-person team  
\$150.00 / single player (will be paired up)  
Includes: Green fees / Cart/ Dinner / Use of driving range with range balls.

**Sponsorships:** \$550.00 – Gold Sponsor (2 Free Players)  
\$300.00 – Silver Sponsor (1 Free Player)  
\$200.00 – Bronze Sponsor  
\$100.00 – Hole Sponsor

**Meal Sponsor: \$1,000.00**

“Sponsors for Door Prizes, Closest to Pin, Longest Drive also needed”

*Buy a Birdie Putt (par 3) - \$20.00/group*

*“Long” Drive(300yd on par 5) - \$20.00/group*

**ENTRY FORM DEADLINE FOR ENTRY FORMS: March 25th, 2018**

| NAME      | COMPANY | PHONE AND E-MAIL | HANDICAP OR AVERAGE SCORE |
|-----------|---------|------------------|---------------------------|
| <b>1.</b> |         |                  |                           |
| <b>2.</b> |         |                  |                           |
| <b>3.</b> |         |                  |                           |
| <b>4.</b> |         |                  |                           |

**PERSON TO CONTACT FOR CONFIRMATION & HOLE ASSIGNMENTS:** By completing this entry form, you hereby absolve any staff member of Central Christian Academy or its board or Longwood Golf Club and its members or any sponsors or players of any liability of any nature that may arise from the tournament.

**NAME:** \_\_\_\_\_ **ADDRESS:** \_\_\_\_\_

**CITY/STATE:** \_\_\_\_\_ **ZIP:** \_\_\_\_\_ **PHONE:** \_\_\_\_\_

**Check #** \_\_\_\_\_ **Name on Check** \_\_\_\_\_ **Total \$** \_\_\_\_\_

Reservations: Mail or fax completed entry form and payment Payable to: **Central Christian Academy** email: **Cathi Jacobs**  
**Fax:713-468-7322** **P.O. Box 800935, Houston** **stjcj77@comcast.net**  
**Texas 77280-0935**

**WE THANK YOU FOR YOUR GENEROUS SUPPORT TO OUR CONTINUED EDUCATIONAL PROGRAMS**  
**\*\*If you cancel due to weather or unable to attend, thank you in advance for your donation.**