



NJSNA Golf Tournament Entry Form

Company Name: _____
Contact Person: _____
Email Address: _____
Telephone: _____
Fax#: _____
Sponsorship Level \$\$: _____

PLEASE RETURN BY July 10th, 2009
Fax to *Audrey Macdonald* 732-751-0367
Or Email: amacdonald@howell.k12.nj.us

PLEASE PRINT NAMES OF ALL GOLFERS & SHIRT SIZES (S, M, L, XL, ETC)
1.
2.
3.
4.
5.
6.

Mail To: NJSNA Swing Into School Nutrition Golf Tournament
Attn: Audrey Macdonald
485 Adelpia Rd
Freehold, NJ 07728

Checks Payable to: NJSNA Golf Tournament

For information contact:
Diane Wilburn Cell: (908) 531-4307
or
Email: Diane.Wilburn@Fritolay.com
(event chairperson)