



Golf Tournament Registration

Player one

Name:

Address:

City:

St:

Zip:

Phone:

E-Mail:

Player two

Name:

Address:

City:

St:

Zip:

Phone:

E-Mail:

Enclosed is our entry fee of \$150.⁰⁰

Unable to participate this year:

**Please leave me on your mailing list
and accept my donation of \$**

Visa/MC/AMEX/Disc accepted

Return this form to:

UCP of Oklahoma

10400 Greenbriar Pl, Ste 101

Oklahoma City OK 73159