

Inland Northwest Chapter Scholarship Golf Outing

All Proceeds Benefit the Inland Northwest Chapter Scholarship Program which awards Scholarships to the children of MSCI Inland Northwest Chapter Company members. Your support and participation at this golf outing will help us continue our Scholarship Awards for 2019.

Friday, September 14, 2018

Kalispel Golf and Country Club

2010 W Waikiki Rd Spokane, Wa 99218

Registration Deadline: Friday, September 7, 2018

Schedule

12:30 Registration
1:00 Modified Shot Gun start
Reception to follow

Registration Fees \$225.00 pp single; \$850.00 for a foursome

Support the Inland Northwest Scholarship by becoming a sponsor!

Golf Hole Sponsorship: \$200.00 ea (9 available)

19th Hole Sponsorship: \$400.00

General Scholarship Donations: \$100.00 increments

To become a sponsor please complete the registration form below or email/call Adrian Mejia
amejia@haskinssteelinc.com or (509)570-2920

Deadline for sponsorship is September 7th



Please fill out all information. \$225.00 per person or \$850.00 for a foursome. (Includes green fees, cart, and reception dinner following the end of the tournament). Please email confirmed foursome to Adrian Mejia at amejia@haskinssteelinc.com no later than September 7th.

		Company						
i	Name	Name		Email	•			
Player 1								
Player 2								
Player 3								
Player 4								
Sponsorship Registration Support the Inland Northwest Chapter Scholarship by becoming a sponsor!								
 □ Golf Hole Sponsorship: \$200.00 each □ 19th Hole Sponsorship: \$500.00 (Cocktail hour behind the 18th green) 								
To become a sponse	or or any donations, amejia@h	please complete plaskinssteelinc.	n: \$100.00 ind the registration fo com / 509-570-29 ip is September 7 th	rm or call/email Adrian	Mejia at			
ayment information: Golfers at \$22 Golfers Foursc Sponsorship D	me at \$850.00	Total Payment	\$\$ \$\$ \$\$	- - -				

□ Check Enclosed(payable to Steel Service Center Institute N.W Chapter)
 □ Credit Card(if paying with credit card, a convenience fee will be included)

Credit Card Authorization Form

Please complete all the fields. You may cancel this authorization at any time by contacting us. This authorization will remain in effect until canceled.

Credit Card Information									
Card Type:	□ MasterCard	□VISA	□ Discover	□ AMEX					
	□Other								
Cardholder Name (as shown on card):									
Card Number:									
Expiration Date (mm/yy):									
Cardholder ZIP Code (from credit card billing address):									
I,									
Customer Signature Date									