

# 6<sup>TH</sup>

# SKYLLA FOR SEMPER FI CHARITY GOLF TOURNAMENT

PROUDLY BENEFITTING



**SEMPER FI**  
FUND



THEY'VE GIVEN SO MUCH. NOW IT'S OUR TURN.

**PRIZES  
DRAWINGS  
HOLE GAMES  
HOLE-IN-ONE PRIZES**



**BREAKFAST  
REFRESHMENTS\*  
AWARDS LUNCHEON\***  
\*INCLUDES ADULT BEVERAGES

**MONDAY,  
SEPTEMBER 11<sup>TH</sup> 2017  
9AM TEE OFF**

**WINDROSE**  
GOLF CLUB  
6235 PINE LAKES BLVD.  
SPRING, TX 77379

**\$600 PER FOURSOME  
OR \$175 FOR INDIVIDUALS  
DUE BY AUGUST 18<sup>TH</sup>**

**TO REGISTER  
OR SPONSOR:**

[WWW.SKYLLASF.ORG](http://WWW.SKYLLASF.ORG)

**P: 281.467.1703**

**E: LEWISS@SKYLLAENG.COM**

SPONSORSHIP PLEDGES MUST  
BE MADE BY **August 18<sup>TH</sup>**  
PAYMENTS MADE BY **Sept 11<sup>TH</sup>**



# 100%

DONATED TO  
**SEMPER FI FUND**  
AND OUR WOUNDED HEROES

PROUDLY SPONSORED

**SKYLLA**  
SUPPORT FUND

# Individual and Team Registration

Monday,  
September 11th, 2017  
at 9:00am



Windrose  
Golf Club  
6235 Pine Lakes Blvd.  
Spring, TX 77379

## 100% OF SPONSORSHIP DONATIONS WILL DIRECTLY BENEFIT THE SEMPER FI FUND

**FORMAT:** FOUR-PERSON SCRAMBLE. WE WILL PLAY RAIN OR SHINE.  
THE \$175 FOR A SINGLE PLAYER, OR REDUCED RATE OF \$600 PER FOURSOME, INCLUDES BREAKFAST,  
18 HOLES OF GOLF, CART FEES, COURSE REFRESHMENTS, AWARDS LUNCH, AND PRIZES.

### PLAYER 1 INFORMATION

NAME: \_\_\_\_\_  
ADDRESS: \_\_\_\_\_  
HANDICAP: \_\_\_\_\_ (OR TYPICAL SCORE FOR 18 HOLES)      PAYMENT INCLUDED? Y N  
PHONE: \_\_\_\_\_      EMAIL: \_\_\_\_\_

PLEASE PROVIDE CURRENT MAILING INFORMATION IN ORDER TO RECEIVE YOUR TAX RECEIPT FOR THIS CHARITABLE CONTRIBUTION.

### PLAYER 2 INFORMATION

NAME: \_\_\_\_\_  
ADDRESS: \_\_\_\_\_  
HANDICAP: \_\_\_\_\_ (OR TYPICAL SCORE FOR 18 HOLES)      PAYMENT INCLUDED? Y N  
PHONE: \_\_\_\_\_      EMAIL: \_\_\_\_\_

PLEASE PROVIDE CURRENT MAILING INFORMATION IN ORDER TO RECEIVE YOUR TAX RECEIPT FOR THIS CHARITABLE CONTRIBUTION.

### PLAYER 3 INFORMATION

NAME: \_\_\_\_\_  
ADDRESS: \_\_\_\_\_  
HANDICAP: \_\_\_\_\_ (OR TYPICAL SCORE FOR 18 HOLES)      PAYMENT INCLUDED? Y N  
PHONE: \_\_\_\_\_      EMAIL: \_\_\_\_\_

PLEASE PROVIDE CURRENT MAILING INFORMATION IN ORDER TO RECEIVE YOUR TAX RECEIPT FOR THIS CHARITABLE CONTRIBUTION.

### PLAYER 4 INFORMATION

NAME: \_\_\_\_\_  
ADDRESS: \_\_\_\_\_  
HANDICAP: \_\_\_\_\_ (OR TYPICAL SCORE FOR 18 HOLES)      PAYMENT INCLUDED? Y N  
PHONE: \_\_\_\_\_      EMAIL: \_\_\_\_\_

PLEASE PROVIDE CURRENT MAILING INFORMATION IN ORDER TO RECEIVE YOUR TAX RECEIPT FOR THIS CHARITABLE CONTRIBUTION.

DONATION PAYMENTS AND REGISTRATION MUST BE SUBMITTED BY **AUGUST 18, 2017**.

BY CREDIT CARD VIA [WWW.SKYLLASEF.ORG](http://WWW.SKYLLASEF.ORG) OR

BY CHECKS MADE PAYABLE TO: **SKYLLA SUPPORT FUND**

And Mail To: Skylla Support Fund, C/O Susan Lewis Duncan, 316 E. Main St., Humble, TX 77338

Questions? Please contact Susan Lewis Duncan, Skylla Engineering Community Event Coordinator: [LewisS@SkyllaEng.com](mailto:LewisS@SkyllaEng.com), P: 281.467.1703