

The Pioneer Florida Museum presents

3<sup>RD</sup> ANNUAL

# ROBERT D. SUMNER *Memorial Golf Tournament*

8:30AM Shotgun Start.

## CASH PRIZES

Closest to pin & closest to the line contests.

### FORMAT: 4 PLAYER SCRAMBLE

(the pro shop can pair individuals to make a team if needed)

### ENTRY FEE \$50 PER PERSON

Includes golf cart & lunch.

### PRIZE PACK \$20 EACH

4 closest to the pin, 1 long drive, 1 closest to the line,  
2 mulligans, 2 drink tickets.



## PLAYERS REGISTRATION FORM • PLEASE PRINT CLEARLY

Team's Company Name: \_\_\_\_\_

Send completed signed form along with payment to:

Pioneer Florida Museum & Village

P.O. Box 335

Dade City, FL 33526-0335

Player 1 Name: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_

E-mail: \_\_\_\_\_



Player 2 Name: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_

E-mail: \_\_\_\_\_

Company Name: \_\_\_\_\_

Contact: \_\_\_\_\_

Address: (billing if paying by credit card) \_\_\_\_\_

Phone: \_\_\_\_\_

E-mail: \_\_\_\_\_

Signature: \_\_\_\_\_

Player 3 Name: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_

E-mail: \_\_\_\_\_

Method of Payment: (check one)

Check

Cash

Credit Card

Please make checks payable to:

Pioneer Florida Museum

Credit Card Number: \_\_\_\_\_

Exp Date: \_\_\_\_\_ 3-4 digit code: \_\_\_\_\_

Name as it appears on the card: \_\_\_\_\_

Signature: (authorizing the Museum to charge your card)  
\_\_\_\_\_

Player 4 Name: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_

E-mail: \_\_\_\_\_

Forms and payment option also available on our website at

[www.pioneerfloridamuseum.org](http://www.pioneerfloridamuseum.org)

or mail to P. O. Box 335, Dade City, FL 33526

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