



13th Annual  
**Morris Memorial  
Golf Tournament**

Friday July 16th

**Registration Form**

(Please register by 7/7)

**8:30am-9:00 Check-in | 9:30am Tee-off**

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

Email: \_\_\_\_\_

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

\_\_\_\_\_

\_\_\_\_\_

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

**Single Cost = \$115 | Foursome Cost = \$400**

Registration Type (Choose One)

Single     Foursome

If foursome, list other participants? *(If Known)*

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

Email: \_\_\_\_\_

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

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

Email: \_\_\_\_\_

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

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

Email: \_\_\_\_\_

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

***\*Please make checks payable to Morris Memorial***

*Please mail completed registration form to:*

Morris Memorial  
PO Box 184  
Chatham, NY 12037

**OR**

*Drop at the front desk at MetzWood Insurance*

11 Central Sq  
Chatham, NY 12037