



# Skills Inc. **AIP**

## Golf Fundraiser

**WHEN: FRIDAY, 9.15.23**

**WHERE: WASHINGTON NATIONAL**

14330 SE Husky Way, Auburn, WA 98092

**TIME: 8AM SHOTGUN START**

7am sign-in & free use of range | Awards luncheon to follow tournament

**FORMAT: 4-PLAYER SCRAMBLE**

**GOLF FEES: \$160 PER PLAYER**

Includes: green fee, cart rental, gift bag, catered lunch, & door prize entry

**MULLIGANS: \$10 each** (2 per player max)

**PUTTING CONTEST: \$5 for 3 attempts** (2 max)

**GREAT PRIZES!**

1st, 2nd, 3rd placed teams, Longest Drive, Closest to the Pin and Putting Contests. Door prizes include putters, drivers, golf bags, and much more. Win a new car in our Hole-in-One Contest!

For more info, visit: [www.skillsinc.com/about/events](http://www.skillsinc.com/about/events).



Skills Inc. is a 501(c)(3) charitable organization. All or part of your contribution may be tax deductible. Please consult your tax advisor. **Tax ID: 91-0816065**

## GOLF REGISTRATION FORM

Join Skills Inc. for its annual golf fundraiser to benefit the Aerospace Internship Program (AIP). Since 2001, this program has helped nearly a thousand students with disabilities graduate from high school with hands-on experience in aerospace manufacturing and special processing. Register online at [www.skillsinc.com/about/events](http://www.skillsinc.com/about/events) or complete this form and return it to: Skills Inc., c/o Monica Dooley, 715 30th Street NE, Auburn, WA 98002 or [MonicaD@skillsinc.com](mailto:MonicaD@skillsinc.com).

### CONTACT INFO

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

Organization: \_\_\_\_\_

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

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

### PLAYER INFO *(singles welcome)*

Player #1: \_\_\_\_\_ Mulligans: \_\_\_\_\_ Putting: \_\_\_\_\_

Player #2: \_\_\_\_\_ Mulligans: \_\_\_\_\_ Putting: \_\_\_\_\_

Player #3: \_\_\_\_\_ Mulligans: \_\_\_\_\_ Putting: \_\_\_\_\_

Player #4: \_\_\_\_\_ Mulligans: \_\_\_\_\_ Putting: \_\_\_\_\_

Team members paying separately? Please list them here: \_\_\_\_\_

### PAYMENT INFO

Total Amount: \$ \_\_\_\_\_

Charge Credit Card

Check *(made to Skills Inc.)*

Send Invoice

Credit Card #: \_\_\_\_\_ Exp. Date: \_\_\_\_\_

CW/CVC: \_\_\_\_\_ Signature: \_\_\_\_\_