



MADPAC GOLF OUTING

Please join us for this 18-hole scramble, where camaraderie meets competition on a championship golf course.

Don't miss out – register now and be part of a day filled with fun, friendship, and fantastic golf!

Bring your foursome and be part of a great group of industry leaders who support a united voice for Michigan's franchised dealers.

DATE & TIME

We hope to see you on **Tuesday, September 10, 2024** for this 33rd annual golf outing at **Hawk Hollow Championship Golf Course**, located at 15101 Chandler Road in Bath, Michigan.

SCHEDULE

- ▶ 8:30 am check in opens
- ▶ 10:00 am shotgun start
- ▶ Lunch provided
- ▶ Awards and reception following play

REGISTRATION & FEES

- ▶ Submit the second page of this handout
- ▶ Payment of \$250 per person can be made by **personal** check or credit card, with an option to pay online at michiganada.org/payments

Please note: corporate checks cannot be accepted for golfer registration.

Platinum
Sponsors



CAPTRUST



REGISTRATION

Please note: home address information is required by Michigan campaign finance law. MADPAC contributions are not charitable-contribution deductions on federal income tax.

Corporate checks cannot be accepted for golfer registration.



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Tuesday, September 10, 2024

GOLFER / TEAM INFORMATION

This form may be used to register an individual or multiple golfers. If registering individually, assignment to a foursome will be random.

Deadline to register is September 1, 2024

Mail: MADPAC, P.O. Box 2525, East Lansing, MI 48826-2525

Fax: (517) 351-3120

Player #1 _____

Company _____

Home address _____

City/State/Zip _____

Daytime phone _____

E-mail _____

Personal check payable to **MADPAC**

Personal credit card: VISA MasterCard Am Ex Discover

Card# _____ Amount \$ _____

CVV _____ Exp. (mm/yy) _____

Cardholder name _____

Signature _____ Date _____

Billing address _____

Player #2 _____

Company _____

Home address _____

City/State/Zip _____

Daytime phone _____

E-mail _____

Personal check payable to **MADPAC**

Personal credit card: VISA MasterCard Am Ex Discover

Card# _____ Amount \$ _____

CVV _____ Exp. (mm/yy) _____

Cardholder name _____

Signature _____ Date _____

Billing address _____

Player #3 _____

Company _____

Home address _____

City/State/Zip _____

Daytime phone _____

E-mail _____

Personal check payable to **MADPAC**

Personal credit card: VISA MasterCard Am Ex Discover

Card# _____ Amount \$ _____

CVV _____ Exp. (mm/yy) _____

Cardholder name _____

Signature _____ Date _____

Billing address _____

Player #4 _____

Company _____

Home address _____

City/State/Zip _____

Daytime phone _____

E-mail _____

Personal check payable to **MADPAC**

Personal credit card: VISA MasterCard Am Ex Discover

Card# _____ Amount \$ _____

CVV _____ Exp. (mm/yy) _____

Cardholder name _____

Signature _____ Date _____

Billing address _____