## Summit Golf Outing Wednesday, March 26, 2025



**Towhee Golf Club** 

Check-In: 7:30 AM Shotgun Start: 8:00 AM

Primary Contact:		Title:		
Company:				
Mailing Address:				
City, State, ZIP:				
Work Phone:		Email:		
GOLFER NAME:	Golf (\$95/person)	Sponsorship		
			X \$100	
		Company name t	o appear on signage:	
TOTALS:				
	Total Golf	Total Golfers X \$95 = Sponsorships X \$100 = TOTAL DU	·	
Payment Information: Charge credit card below Send me an invoice			Make Checks Payable To: ACTS Now Inc.	
☐ Visa ☐ Mastercard ☐ Discover ☐ American Express			PO Box 644	
Card#			Conway, AR 72033	
Sec # Exp. Date:			No refunds will be issued after 2/26/25.	
Name on Card:			Charge will show as ACTS NOW on statement.	
Cards Billing Address:				
Amount Charged: S	ignature:			