

# 4th Annual Shepherd's Hand Golf Tournament

## Entry Form and payment

Please print and complete this entry form listing you and your team members. Return it by August 30 with your check(s) made payable to **Mt. Zion Lutheran Church** to:

Danny Rice  
Mt. Zion Lutheran Church  
1600 Ridge Road  
New Market, Va 22844

## ***Players Entry Form***

**Captain's Name:** \_\_\_\_\_ **Email address:** \_\_\_\_\_

**Street Address:** \_\_\_\_\_ **City/State/Zip:** \_\_\_\_\_

**Contact phone #:** \_\_\_\_\_ **Player 2 Name:** \_\_\_\_\_

**Player 3 Name:** \_\_\_\_\_ **Player 4 Name:** \_\_\_\_\_

Payment enclosed (\$70 per player/\$280 per team)  
**Please include check/checks for all players with entry form  
and return by August 30.**