## *Summit Golf Outing* Wednesday, March 25, 2026



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 (\$110/person)	Sponsorship
	_ 🗆	X \$100
		Company name to appear on signage:
TOTALS	:	

Total Golfers X \$110 = \_\_\_\_\_ Total Golf Sponsorships X \$100 = \_\_\_\_\_ TOTAL DUE \_

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 2/25/26
Name on Card:		Charge will show as ACTS NOW on statement.
Cards Billing Address:		statement.
Amount Charged:	Signature:	

For more information, visit <u>www.tennessee.damagepreventionsummit.com</u>, call ACTS at 501-548-6363, fax 501-548-6969 or email <u>thesummit@aligningchange.com</u>