The 15th Annual M.J. Petretto Foundation Golf Classic Registration Form Monday, June 24, 2024

Contact Person/Title			
Company Name	_		
Address			
City		State	_ Zip Code
PhoneEn		mail	
Signature			_
Please indicate your donation level:Tournament Title Sponsor - \$10,000		Please indicate where you would like your sponsorship allocated: Gaylord's Spinal Cord Injury Program Gaylord's Spinal Cord Injury Program Image: Constraint of the second structure of the second stru	
Player's Name Handicap	Address	Email Address	Phone Number
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Please submit your sponsorship o contact@mjpfoundation.org or m	or golfer registrat ail to: The M.J. P	tion form via email at etretto Foundation on Post Road, Suite E	To register online, scan the QR code:

Please make checks payable to "The M.J. Petretto Foundation" or pay through card below. Please note, we only accept MasterCard or Visa.



Card #:_

_Exp:____

____CVV#:___

For more information, please contact The M.J. Petretto Foundation at 203-453-2320 or contact@mjpfoundation.org.