

The
EIGHTH
ANNUAL



**Benefiting
The Samaritan Center**

*This year's Ministers Cup is dedicated
to Reverend Gerald Mann,
a Good Samaritan*

**Monday, September 24th, 2007
Registration 7:00 AM
The Golf Club at Circle C**

*You may register
on line by going
To: www.samaritan-center.org*

Sponsor Form

Sponsorship:

- | | | | |
|--|--------|--|-------|
| <input type="checkbox"/> Double Eagle | \$6000 | <input type="checkbox"/> Birdie | \$750 |
| <input type="checkbox"/> Eagle | \$2500 | <input type="checkbox"/> Par | \$250 |

Payment method:

- Please charge my entry fee of \$ _____ to: VISA
 MasterCard

Card # _____ Exp. Date _____

Signature _____

SPONSOR NAME

PARTICIPANT NAME *(if different than above)*

ADDRESS

CITY

STATE

ZIP

HOME PHONE

WORK PHONE

E-MAIL

For sponsorship information

Call Andrea Ames at (512) 372-8118
Don Ames at (512) 372-8118
or Nancy Blaich (512) 451-7337

Or mail this form to:
Samaritan Center for Counseling & Pastoral Care
ATTN: Ministers Cup
5425-A Burnet Road
Austin, TX 78756

Registration Form

THE EIGHTH ANNUAL MINISTER'S CUP Benefiting the Samaritan Center

Team Participation:

- Six player team (including playing minister): **\$1000**
- Six player team: **\$1200**
- Individual player: **\$ 225**

Payment method:

- Please charge my entry fee of \$ _____ to: VISA
 MasterCard

Signature _____

Card # _____ Exp. Date _____

Please mail registration form and check made payable to:
"Samaritan Center For Counseling & Pastoral Care"
5425-A Burnet Road, Austin, TX 78756
by September 17th, 2007



If you want to register online
go to www.samaritan-center.org

PLAYER 1 NAME

ADDRESS

CITY STATE ZIP

HOME PHONE WORK PHONE

E-MAIL

CHURCH NAME

PLAYER 4 NAME

ADDRESS

CITY STATE ZIP

HOME PHONE WORK PHONE

E-MAIL

CHURCH NAME

PLAYER 2 NAME

ADDRESS

CITY STATE ZIP

HOME PHONE WORK PHONE

E-MAIL

CHURCH NAME

PLAYER 5 NAME

ADDRESS

CITY STATE ZIP

HOME PHONE WORK PHONE

E-MAIL

CHURCH NAME

PLAYER 3 NAME

ADDRESS

CITY STATE ZIP

HOME PHONE WORK PHONE

E-MAIL

CHURCH NAME

PLAYER 6 NAME

ADDRESS

CITY STATE ZIP

HOME PHONE WORK PHONE

E-MAIL

CHURCH NAME

See other side for sponsorship information.