X-CORINTHIA		
	Monday, September 22, 2025 – Las Colinas Country Club	
	Sponsor / Player Entry Form	
I wish to participate in t	e 2025 Knox-Corinthian Golf Tournament:	
Platinum Sponsor • Four playing spots (one		

• Special recognition and sponsor gift

Gold Sponsor	\$3,00
 Four playing spots (one 	team)
 Recognition in event pr 	ogram
Bronze Sponsor	\$500

bronze sponsor	20
 One playing spot 	

 Silver Sponsor	 Bronze Sponsor	00
Last name:	First name:	
Address:	City:	State:ZIP:
Email:	Phone:	
Club Membership:	_Handicap index: Shirt size:	Age(<i>men only</i>)as of Sept. 22, 2025:

IF YOU HAVE ARRANGED TO PLAY WITH OTHERS, PLEASE LIST THEM HERE. Be sure to provide all contact information.

Player information:

2. Last name:	First nan	ne:		
Address:	City:		State:ZIP:	
Email:		Phone:		
Club Membership:	Handicap index:	_ Shirt size:	Age (men only) as of Sept. 22, 2025:	
3. Last name:	First nan	ne:		
Address:	City:		State:ZIP:	
Email:		Phone:		
Club Membership:	Handicap index:	Shirt size:	Age (men only) as of Sept. 22, 2025:	
4. Last name:	First nan	ne:		
Address:	City:		State:ZIP:	
Email:		Phone:		
Club Membership:	Handicap index:	Shirt size:	Age (<i>men only</i>) as of Sept. 22, 2025:	
Type of Card: 🗆 VISA 🗳 M	asterCard 🛛 🖵 American Express	Discover	Please return this form to:	
Name of Cardholder:		Scottish Rite for Children		
Card Number:		Knox-Corinthian Colf Tournament		
Expiration Date: Month:Year:Year:		PO Box 122027 Dept 2027 Dallas, Texas 75312-2027		
•			Email: knoxcorinthian.golftournament@tsrh	.org
			Register online at	
Is this a company credit card? 🖸 Yes 📮 No		https://srchildren.org/KCGT or scan the QR Code below		
If yes, please provide company n	ame:			_
Total to be charged to this card:	\$		For additional information,	린ㅣ
	¥			
Signature:	÷		please contact	
Signature: Please make checks payable to:			please contact Ashley Givens at 214-559-7682	S. R.