A Shot in the Dark Registration Form

September 11, 2009 - Willow Creek Golf Course

Send this form in with your $75 per person to:

Prevent Blindness Iowa
1111 9th St. Suite 250
Des Moines, IA 50314
Or fax to
515-244-4718

☐ Check enclosed (make payable to Prevent Blindness Iowa)
☐ Charge my credit card for $_____ ($75 per person) ☐ MasterCard ☐ Visa ☐ Discover
Card # _____ Expiration Date _____
Signature _____

Please sign up as a foursome if possible. All other participants will be randomly assigned.

1. _____
Captain Name
_____
Address
_____
City State Zip
_____
Day Phone Evening Phone
_____
E-Mail Address

2. _____
Name
_____
Address
_____
City State Zip
_____
E-Mail Address

3. _____
Name
_____
Address
_____
City State Zip
_____
E-Mail Address

4. _____
Name
_____
Address
_____
City State Zip
_____
E-Mail Address

Please call Prevent Blindness Iowa at 515-244-4341 or email at mail@preventblindnessiowa.org with any questions.