

## INDIVIDUAL REGISTRATION FORM

[If you are a foursome, please list on reverse side]

PLEASE PRINT

Player Name \_\_\_\_\_ HDCP \_\_\_\_\_  
Address \_\_\_\_\_  
Day Phone \_\_\_\_\_  
E-mail \_\_\_\_\_

I would like to be a **Golf Tournament Sponsor**  
at the following level (see reverse side for sponsorship level  
details):

I am unable to attend but would like to **donate** a prize of:  
\_\_\_\_\_  
or the enclosed gift of \$\_\_\_\_\_.

MAKE CHECK PAYABLE TO:

**New Orleans Medical Mission Services**

PLEASE PROVIDE CREDIT CARD INFORMATION:

Please Check: \_\_\_\_\_ MC \_\_\_\_\_ VISA \_\_\_\_\_ AMEX  
Card # \_\_\_\_\_  
Exp Date \_\_\_\_\_ CW# \_\_\_\_\_  
Name on Card \_\_\_\_\_  
Billing Zip Code \_\_\_\_\_  
Signature \_\_\_\_\_

### SPECIAL THANKS TO

**BankPlus, Hydra Force, NOMMS  
Volunteers and the Timberlane Golf &  
Recreation staff.**

Take home prizes and the good feeling of helping  
**New Orleans Medical Mission Services**  
In PROVIDING HEALTH RELIEF TO THE POOR



New Orleans Medical Mission Services, Inc.  
P.O. Box 6249 - New Orleans, LA 70174  
T 504-392-1934 • F 504-301-1831  
[www.nomms.org](http://www.nomms.org)

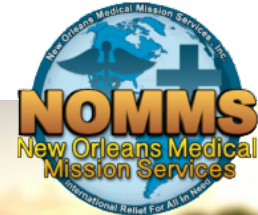
# BankPlus®

## Fred Mikill

### Memorial Golf Tournament



Our 18th Annual Tournament  
Timberlane Golf & Recreation  
To benefit the New Orleans Medical Mission  
Services



## GOLF SPONSORSHIP LEVELS

### CORPORATE SPONSOR 1 \$700

4-some and hole sponsor signage. Includes lunch, golf, drinks on the course, dinner and special NOMMS gift for each player.

### CORPORATE SPONSOR 2 \$300

Name will be placed on banner at registration. Pavillion on day of tournament.

### FOURSOME SPONSOR \$600

4-some and includes lunch, golf, drinks on the course, dinner and special NOMMS gift for each player.

### DRINK CART SPONSOR \$500

Special recognition and signage on drink cart.

### INDIVIDUAL GOLFER \$150

Includes lunch, golf, drinks on the course, dinner and special NOMMS gift.

### HOLE SPONSOR \$150

Special signage.

### SAND TRAP SPONSOR \$25

### FRIEND OF NOMMS

If you are not a golfer we would very much appreciate your support in kind:

**\$25 \$50 \$75 \$100 Other\_\_\_**

## THE TOURNEY

### REGISTRATION & LUNCH

**11 AM to 12:15**

### TEE OFF

**12:15**

### PUTTING CONTEST

**Split the Pot**

### CHEATER'S ROPE

**MULLIGANS**

**HOLE IN ONE**

## NOMMS Mission

“Deliver medical relief and expertise to the underprivileged population of the world, and respond to local needs, through services, treatment, and supplies, in a manner that respects the dignity and self-esteem of program recipients and volunteers.”

## Golf Committee Co-Chairs

Steve Guccione

Michael Kennedy

Jay Vallenlungo

## Golf Committee Members

Dana Atchison

Harold Buchler

Edna & Ken Centola

Jack Dardis

Eric Davis

Jeanne & John Driscoll

Jennifer Esler

Kevin Ericksen

R. Daniel Jacob

Kristie McConnell

Tom & Mary Kennedy

Mark Manda, Bank Plus

Dan Milham

Jake & Joan Orfanello

Holly Pritchard

Jim Ray

David Richards

Ralph Senner

## DOOR PRIZES

## DINNER TO FOLLOW THE TOURNAMENT

**\$10,000 HOLE-IN-ONE PRIZE**

# BankPlus®



## 18th Annual Golf Tournament Friday, May 9, 2025

**Timberlane Golf & Recreation**  
700 Lapalco Blvd. | Gretna, LA 70056

PLEASE CIRCLE DIVISION: LADIES' OR MEN'S

1. Contact Name \_\_\_\_\_ HDCP \_\_\_\_\_  
Address \_\_\_\_\_  
Day Phone \_\_\_\_\_  
E-mail \_\_\_\_\_
2. Name \_\_\_\_\_ HDCP \_\_\_\_\_  
Address \_\_\_\_\_  
Day Phone \_\_\_\_\_  
E-mail \_\_\_\_\_
3. Name \_\_\_\_\_ HDCP \_\_\_\_\_  
Address \_\_\_\_\_  
Day Phone \_\_\_\_\_  
E-mail \_\_\_\_\_
4. Name \_\_\_\_\_ HDCP \_\_\_\_\_  
Address \_\_\_\_\_  
Day Phone \_\_\_\_\_  
E-mail \_\_\_\_\_

PLEASE DETACH THIS PANEL AND MAIL TO:  
NOMMS GOLF TOURNAMENT  
P. O. BOX 6249 - NEW ORLEANS, LA 70174

For more information please contact  
ECENTOLA@NOMMS.ORG - T: 504-392-1934

