



The **24th** Annual John Reburn Memorial Golf Tournament

Moore County Republican Men's Club  
*The Men's Club's major annual fundraiser*  
Country Club of North Carolina (**Dogwood Course**)

**Monday, July 20, 2020**

Application: Please review and complete this form. Options: Play Golf / Sponsor a Hole / Sponsor a First Responder (Fire, Police, EMS) / Upgrade to a "Kitchen Sink" package / Make a Donation / Attend the Luncheon only  
**All net proceeds will go to support Republican Candidates in crucial upcoming November elections.**

**8:30 am Shotgun Start | Lunch at 1:15 pm | Guest Remarks at 2:00 pm | Golf Awards following Lunch**

Golf Player(s): (Sign up as Individuals or Foursomes. Golf staff will adjust final score based on team handicap. If no handicap, use average 18-hole score)

#1 Player _____	Handicap _____	\$170* [ ]	Kitchen Sink Pkg** \$25 [ ]
#2 Player _____	Handicap _____	\$170* [ ]	Kitchen Sink Pkg** \$25 [ ]
#3 Player _____	Handicap _____	\$170* [ ]	Kitchen Sink Pkg** \$25 [ ]
#4 Player _____	Handicap _____	\$170* [ ]	Kitchen Sink Pkg** \$25 [ ]

**\*Includes Greens Fee, Cart, and Lunch**

**\*\*Kitchen Sink Package includes: Two tickets that can be used for mulligans or beers.**

**Also included: two chances in raffle drawing for a \$250 CCNC Golf Shop credit to be drawn at lunch.**

**Additional Opportunities: Sponsor First Responder(s) \$170 per [ ] + Kitchen Sink Pkg\*\* \$25 [ ]**  
*A portion of the fundraising total will be donated to the North Carolina Law Enforcement Officers Association*

Sponsor a Hole **\$195** [ ] Sign Description: \_\_\_\_\_

**Contribution option if you do not wish to play golf or attend lunch:**

Eagle (includes lunch) \$150 [ ] Birdie \$100 [ ] Par \$50 [ ] Other \$ \_\_\_\_\_ [ ]

Lunch Attendee only **\$25** [ ]

(I understand that all payments are by personal check only, cash will be accepted if under \$50 but personal checks are preferred. Election laws require that MCRMC accept payment from individuals only. Payments and contributions are NOT tax deductible.) Please complete the following:

Name (please print): \_\_\_\_\_

Address: \_\_\_\_\_

Occupation: \_\_\_\_\_

Email address: \_\_\_\_\_ Cell phone #: \_\_\_\_\_

Check all that apply above. Mail completed form with payment to:

Treasurer – MCRMC  
PO Box 1812 Southern Pines, NC 28388

**\*\*\*Application must be received by July 13, 2020\*\*\***

