



Thank you!

SPONSOR/ DONATION APPLICATION

NAME: _____

ADDRESS: _____

CITY, STATE, ZIP CODE: _____

PHONE NUMBER: (home) _____ (cell) _____

EMAIL: _____

SPONSOR _____

Person/s or business name for sponsor credit

ANONYMOUS

DONATION AMOUNT \$ _____

Please make check payable to Wilmington Junior Golf Academy

Mailing address: 244 Princess Street, Suite 16, Wilmington, NC 28401

SIGNATURE _____