



REGISTRATION FORM LIABILITY WAIVER

I, the undersigned, hereby waive, release and hold harmless the Kansas City Mizzou Tiger Club, Oakwood Country Club and all of its employees from any liability for injury or loss through my participation in this event. I further agree to indemnify the University of Missouri and its employees of any liability whether implied or direct .

DATE: MONDAY, JUNE 27

TIME

Check-in begins 10:30 am
Lunch buffet starts 11:00 am
Shotgun start at noon

PLACE

Oakwood Country Club
Kansas City, MO

COST: \$250 per player

Sponsorship opportunities including golf for 4 with a 5th celebrity golfer representing Mizzou Athletics begin at \$1,500. For more information, contact us at golf@kctigerclub.com

Your registration includes:

- 18 holes of golf (including cart)
- Lunch and post-golf Dinner
- On-course games
- Exciting Silent Auction

Questions?

golf@kctigerclub.com

Name Player #1: _____

Address: _____

City: _____ State / Zip: _____

Phone Number: _____

Email Address: _____

Shirt Size _____

Player #2 Name: _____

Email: _____

Shirt Size _____

Player #3 Name: _____

Email: _____

Shirt Size _____

Player #4 Name: _____

Email: _____

Shirt Size _____

(you do not have to have a full team to register, single, and partial teams are welcome)

Number of Players X \$250.00 _____ or
_____ Team of 4 for \$1,000.00 _____

Make checks payable to: Tiger Club of Kansas City.

Please mail completed application and payment to:

Tiger Club of Kansas City
PO Box 7100
Kansas City, MO 64113