

### Single Registration

Please complete the information below. If you would like to pre-select your team, please indicate so on this form. Pre-selected teams are not eligible to win the golf tournament and must be submitted by the due date.

Name: \_\_\_\_\_  
 Company: \_\_\_\_\_  
 E-mail: \_\_\_\_\_

**September 24 Reception:**  Will attend  Will not attend  
 \*If attending: name of guest if applicable \_\_\_\_\_

**September 25 Golf:**  Will attend  Will not attend  
**Handicap (or average score):** \_\_\_\_\_ **Pre-selected Team:** Y or N **Shirt Size:** \_\_\_\_\_

<b>Single Player =</b>	\$ 125
<b>Additional Players: _____ x \$125 =</b>	\$ _____
<b>Total Payment =</b>	\$ _____

**Payment Options:**

- Pay on-site via cash, credit card, or check
- Mail this form with check payable to **Power Play Scholarship Association:**

**Tennessee Valley Authority**  
**Attention: Erin Cardin**  
**1101 Market Street BR5-B**  
**Chattanooga, TN 37402**

*\*Lodging information will be provided to those that are attending at a later date.*

### Additional Players (\$125 each)

Name: \_\_\_\_\_  
 Company: \_\_\_\_\_  
 E-mail: \_\_\_\_\_

**September 24 Reception:**  Will attend  Will not attend  
 \*If attending: name of guest if applicable \_\_\_\_\_

**September 25 Golf:**  Will attend  Will not attend  
**Handicap (or average score):** \_\_\_\_\_ **Pre-selected Team:** Y or N **Shirt Size:** \_\_\_\_\_

Name: \_\_\_\_\_  
 Company: \_\_\_\_\_  
 E-mail: \_\_\_\_\_

**September 24 Reception:**  Will attend  Will not attend  
 \*If attending: name of guest if applicable \_\_\_\_\_

**September 25 Golf:**  Will attend  Will not attend  
**Handicap (or average score):** \_\_\_\_\_ **Pre-selected Team:** Y or N **Shirt Size:** \_\_\_\_\_

Name: \_\_\_\_\_  
 Company: \_\_\_\_\_  
 E-mail: \_\_\_\_\_

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