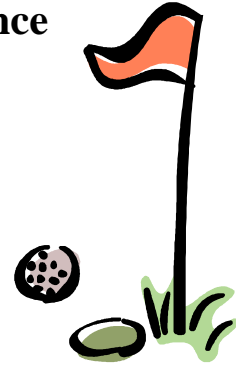




**Missouri Water and Wastewater Conference
Golf Tournament
Wednesday, September 30, 2020**

\$45.00 per player

**Oak Hills Golf Center
932 Ellis Blvd.
Jefferson City, MO 65101**



**Registration Requested
Before September 21**

9:30 a.m. check in
Tournament begins at 10:00 a.m.

- Four person scramble
- Shot gun start
- Lunch (hotdog, chips, soda)
- Cash prizes

Directions to the Course:

From the Capitol Plaza Hotel, head toward Missouri Blvd on W. McCarty St. 314 ft. Turn left onto Missouri Blvd..4 miles. Turn left and take ramp onto US-54 W toward Lake of the Ozarks for 1.8 miles. Take the MO/C/Ellis Blvd/Southwest Blvd exit toward Ellis Blvd. for 2 miles. Turn left onto Ellis Blvd (MO-C) for 1 mile. Oak Hills Golf Center, 932 Ellis Blvd. is on the right.

2020 Golf Tournament Registration



Please make checks or money orders payable to the MWWC and mail, along with this form, to MWWC, 3230 Emerald Lane, Suite 500, Jefferson City, MO 65109. If you are faxing or emailing this form, we will email or FAX an invoice.

PLEASE FILL OUT THE FOLLOWING INFORMATION COMPLETELY AND LEGIBALLY

Players:

1. Name of Golfer: _____
Paid By: _____
Contact Person: _____
Billing Email Address (City, State, Zip Code) of Payer: _____
Day time Area Code & Phone Number of Payer: _____
Area Code & FAX of Payer: _____

2. Name of Golfer: _____
Paid By: _____
Contact Person: _____
Billing Email Address (City, State, Zip Code) of Payer: _____
Day time Area Code & Phone Number of Payer: _____
Area Code & FAX of Payer: _____

Number of Players _____ @ \$45.00 = \$ _____

3. Name of Golfer: _____
Paid By: _____
Contact Person: _____
Billing Email Address (City, State, Zip Code) of Payer: _____
Day time Area Code & Phone Number of Payer: _____
Area Code & FAX of Payer: _____

4. Name of Golfer: _____
Paid By: _____
Contact Person: _____
Billing Email Address (City, State, Zip Code) of Payer: _____
Day time Area Code & Phone Number of Payer: _____
Area Code & FAX of Payer: _____