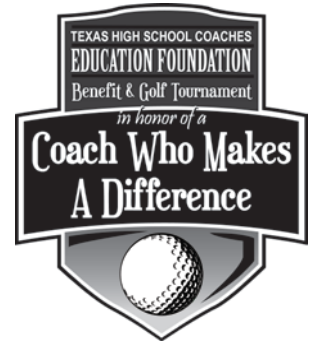


2012 Texas High School Coaches Education Foundation

"Coach Who Makes a Difference" Benefit & Golf Tournament

April 29-30, 2012, San Antonio, J.W. Marriott Resort and TPC Golf Course



Please fill out the form below and mail or fax it back to the THSCEF Office at,
PO Drawer 1138, San Marcos, TX 78667 or Fax: 512/392-3762

For questions or more information, please call us at 512/392-3741

Hall of Fame Package \$4,000	Championship Package \$2,000	MVP Package \$500	Additional Options
Includes: • 4 Tickets to Benefit & Auction • Golf on Sunday for 4 <i>(Includes Green Fees and Carts)</i> • 4 Hotel Rooms Sunday Night • Tournament Team of 4 Players <i>(Includes Green Fees and Carts)</i> • Awards BBQ Lunch for Team • Discount at Resort Spa	Includes: • 4 Tickets to Benefit & Auction • Tournament Team of 4 Players <i>(Includes Green Fees and Carts)</i> • Awards BBQ Lunch for Team	Includes: • 1 Ticket to Benefit & Auction • Tournament Golf for 1 Player <i>(Includes Green Fee and Cart, You will be assigned to a team)</i> • Awards BBQ Lunch for Player	Ticket to Benefit & Auction \$125 Tournament Sponsor* Benefit Sponsor* <i>*If you are interested in learning more about sponsorship opportunities or other ways you can help, please contact the THSCEF at 512.392.3741 or visit our website at www.thscef.com</i>

Contact's Name: _____ Phone Number: _____

Company/School Name (If Applicable): _____

Street Address: _____ City: _____

State: _____ Zip Code: _____ Email Address: _____

Which package would you like to purchase?

Hall of Fame

Championship

MVP

If you would like to purchase additional tickets to the Benefit and Live Auction, how many? _____

I would like to be contacted about donating an item for the Live Auction Benefit? YES NO

I would like to be contacted about Benefit and/or Tournament sponsorship opportunities? YES NO

Please list the names and email address of the players on your Team or individual MVP Player(s).

Player 1: _____ Email: _____

Player 2: _____ Email: _____

Player 3: _____ Email: _____

Player 4: _____ Email: _____

Please list the name of the coach your team will play in honor of: _____

If you are purchasing the Hall of Fame Package, that includes 4 rooms at the J.W. Marriott Resort for Sunday night, the room reservations will be made in the names of the 4 players you have listed. If this is not how you would like the rooms reserved, contact Becky Adams, at 512/392-3741.

Method of Payment: Cash <input type="checkbox"/>				Visa <input type="checkbox"/>	MasterCard <input type="checkbox"/>	Money Order <input type="checkbox"/>	Check <input type="checkbox"/>	Check #:
Credit Card #:						Exp. Date:		V-Code:
Cardholder's Name:					Cardholder Signature:			
Billing Address:								