



Birdies for Charity® PROGRAM REGISTRATION FORM



LEGAL NONPROFIT NAME: _____

Note: This is the name that will be verified with the IRS to confirm nonprofit status.

CHARITY NAME: _____

Note: Please list name as you would like it to appear in print.

CONTACT NAME: _____

Note: Please list name of person who will be administering the BFC program for your charity.

MAILING ADDRESS: _____

STREET ADDRESS: _____

PHONE: _____ **E-MAIL:** _____

WEBSITE URL: _____

MISSION STATEMENT- This will appear on our website along with your logo. Please limit statement to 500 characters (with spaces) and email your logo in jpg or gif format to nporter@attpbgolf.com.

Yes - our organization would like to participate in the Birdies for Charity® Program conducted by Monterey Peninsula Foundation.

Signature of Authorized Representative and Date

Mail or Fax:

Monterey Peninsula Foundation
1 Lower Ragsdale Dr., Building 3, Suite 100
Monterey, CA 93940
Phone: 831-649-1533 Fax: 831-649-1763

Questions? Nettie Porter - nporter@attpbgolf.com

