



Maine
Association
of Mortgage
Professionals

MAMP Golf Tournament

Tuesday, July 26, 2022 – 8:30 a.m. shotgun start

Toddy Brook Golf Course - 925 Sligo Rd., North Yarmouth, ME

Deadline to Register is: July 18, 2022

Come join MAMP for an 18 hole golf tournament. Register now, don't wait, Rhonda sold out our Charity Tournament out in less than 2 weeks!

Golf Team \$500 – Golf for 4 players, includes cart and lunch

Not a golfer? That's ok. Don't miss out on your networking opportunity at lunch. Lunch will be at 1:30 p.m. **Just Lunch \$35/person.**

We have the following limited sponsorships available:

Hole Sponsor (\$150) – Your company logo on a sign at a hole.

19th Hole Sponsor (\$250) – Everyone's favorite hole – the bar!

Lunch Sponsor (\$250) – Sponsor the delicious lunch buffet.

Don't forget to bring some cash too. We will have Rhonda's arm's length raffle tickets for sale and lots of great prizes!

If you have any questions or concerns, please contact:

Rhonda Small (207) 233-7888 or Emily Hood (207) 712-0402
rsmall@annie-mac.com mampexecutivedirector@gmail.com

Maine Association of Mortgage Professionals – P.O. Box 1571, Bangor, ME 04402

Our policy is to hold all scheduled presentations unless the presenter cancels, the facility closes or a circumstance necessitates a postponement. MAMP reserves and pays for the meeting facilities based on registrations, once an attendee registers, he or she will be charged, regardless of attendance, unless the event is cancelled by MAMP.



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GOLF REGISTRATION:	(Circle one)
Team Registration Fee	\$500
Lunch Only	\$35

SPONSORSHIP REGISTRATION:	(Circle one)
Hole Sponsorship	\$150
19 th Hole Sponsorship	\$250
Lunch Sponsorship	\$250

TEAM INFO:

Team Name: _____

Contact Name: _____ Phone: _____

Company: _____

Address: _____

Email: _____

Team Captain: _____ Handicap: _____

Email: _____

Player 2: _____ Handicap: _____

Email: _____

Player 3: _____ Handicap: _____

Email: _____

Player 4: _____ Handicap: _____

Email: _____

PAYMENT METHOD:

_____ Check enclosed _____ Credit Card (please provide the following information):

Name on Card: _____

Card Number: _____

Expiration date: _____ CVV Code: _____

Billing Address: _____

City: _____ State: _____ Zip: _____

Tel: _____ Email: _____