

***Annual Charity Clay Sport Shooting Event***

***Sat. February 9, 2019***

***REGISTRATION FORM***

***YES, I want to support Zonta Club of Houston Educational and Charitable Fund’s (ZCHECF) Sport Clay Shooting Event:***

***Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_ # Of Individual Shooters @ $130***

***Address:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_ # Of Teams -Five Shooters@ $600***

***City: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ St: \_\_\_\_\_ Zip: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_***

***Email Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_ # Of Non-Shooter Lunches @ $25 ea.***

***Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_ # Of Supporter Signs @ $\_\_\_\_\_\_\_\_\_***

***\_\_\_ Count me in for an Underwriter Sponsorship for $\_\_\_\_\_\_\_\_\_\_ (enter amount)***

 ***My check payable to ZCHECF is enclosed***

 ***Please Charge my AMEX MC VISA DISCOVER***

**Acct #\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Exp Date \_\_\_\_\_\_\_\_\_ Validation Code \_\_\_\_\_**

**If Name on card or Billing address is different from above:**

***Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_***

***Address:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_***

***City: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ St: \_\_\_\_\_ Zip: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_***

**Mail Registration to : *Zonta Club of Houston Educational and Charitable Fund (ZCHECF)***

 ***c/o Kayleen Kill***

 ***12410 Shadow Island Dr***

 ***Houston, Texas 77082***