SHOOT FOR RECOVERY

		Registration Form			
Name	Company/ Organization				
Address		Service and the service and th	2000年		
City		State	7.85 98 5	Zip	
Phone	A P A T C L C C C C C C C C C C C C C C C C C	Email	7. 好先總 名		
SHA.		Payment Information	on 🔵		
Check	Please enclo	ose your check made	e payable t	to Pay it	Forward
Credit Card -	Visa [Master Card	Discov	/er	AMEX
Card #		Expi	res	CVV	
Per IRS guidelines your gift to Pa actual value of the goods or service. This information Teams con	tion is due	at payitforwardsa.org and er Living, Inc., EIN #27-5110908 is deductible at a. For this event that value is \$25 per team more to us no later than left (4) shooters exceptions and exceptions are considered as a constant of the constant of	s a charitable contribution and comber. Please retain a comber. Please retain	rch 24 a	t 5 PM
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5.	Second team n	nembers, exclusively for Preser	iting Sponsor Ca	itegory	
		6.	ETERNISH E	F 2 7	
7.		8.			



payitforwardsa.org

1 Haven for Hope Way, Suite 3.703 San Antonio, Texas, 78207 Office - 210.212.2926

