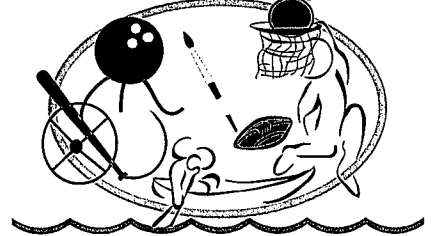


D R E A M



# THE DREAM PROGRAM 7th Annual Charity GOLF TOURNAMENT

## About us . . .

Hello! My name is Troy Trigg! My wife, Lindsay and I are residents of Jackson County. We started a program that offers many recreational and leisure opportunities for people with and without disabilities. We have found this program to be greatly needed and has been rewarding for all of those involved.

The **DREAM** program started in June 2006 with unified softball. Since then we have added unified flag football, basketball, bowling, canoeing, cheerleading and an arts and craft class. In order for this program to be successful we need donations/contributions. Our primary fundraiser for this program is our annual golf tournament. Please check us out at: [www.dreamprogram.net](http://www.dreamprogram.net)

## TAKE A SWING!

Your help is needed now! By playing in our annual golf tournament, you are taking a SWING at improving our community. We are looking for teams to play a 3 person scramble, win prizes, help the community, and have fun. if you are unable to acquire a team of three, sign up individually and we will create teams according to handicaps. Below you will find the entry fee form. Please fill out the entry form and send the fee and form to the address provided. You can call Troy at any time for further information at **228-215-1767**.

## You don't play GOLF?

*Well, we still need your help in many ways! We are looking for:*

- VOLUNTEER COACHES • VOLUNTEER PLAYERS • BOARD MEMBERS
- DONATIONS • HOLE SPONSORSHIP FOR GOLF TOURNAMENT

IF YOU WOULD LIKE TO RECEIVE MORE INFORMATION ABOUT THE LISTED PROGRAMS AND OPPORTUNITIES PLEASE SEND IN YOUR CONTACT INFORMATION ON THE FORM BELOW.

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### DREAM PROGRAM 7TH ANNUAL GOLF TOURNAMENT AND OTHER OPPORTUNITIES

List players names and handicaps: (Return this form with entry fee)

PLAYER 1 \_\_\_\_\_

PLAYER 2 \_\_\_\_\_

PLAYER 3 \_\_\_\_\_

\_\_\_\_\_ I have included our entry fee of \$ \_\_\_\_\_

\_\_\_\_\_ I do not play golf but would love to hear more about the DREAM Program and related opportunities. Please: \_\_\_\_\_ mail and/or email me with calendars and newsletters.

Contact name \_\_\_\_\_ Address \_\_\_\_\_

Email \_\_\_\_\_ Phone \_\_\_\_\_