

**17th Annual Perry Rotary Club
Fishing Tournament
Team Registration**

Sponsor Name: _____

Address: _____

Name (adult): _____

Address: _____

City: _____ State _____ Zip _____

Cell Phone: _____

Email: _____

Name(adult/youth): _____

Address: _____

City: _____ State _____ Zip _____

Cell Phone: _____

Email: _____

Name: (youth): _____

Age(if under 17) _____

□

RETURN REGISTRATION FORMS TO:

CADENCE BANK

ATTN: PENNY BYRD

1208 WASHINGTON STREET

PERRY, GA 31069

penny.byrd@cadencebank.com

478-796-7134

DEADLINE: NOON – APRIL 11th