

2025 CCAPI Annual Four-Person Golf Scramble

Friday, May 30, 2025

Corpus Christi Country Club

INFORMATION:
COMPANY:
NAME:
EMAIL:
CONTACT #:

TEAM 1:	_
	PLAYER 2: COMPANY:
PLAYER 3: COMPANY:	PLAYER 4:

TEAM 2:	_
PLAYER 1:	PLAYER 2:
COMPANY:	_ COMPANY:
PLAYER 3:	PLAYER 4:
COMPANY:	_COMPANY:

Waiver: By participating in the activity being promoted, you agree to release and discharge CCAPI, its officers, committees, individual committee members, and their respective sponsors from all liabilities, claims, demands, and causes of action for damage or injuries you may suffer or sustain in connection with your participation in CCAPI-related activities

PAYMENT INFORMATION

\$7,000	\$
\$4,000	\$
\$3,500	\$
\$3,500	\$
\$3,500	\$
\$3,500	\$
	\$
	\$
	\$
	\$
	·
	\$
\$500	\$
\$300	\$
\$200	\$
\$50	\$
\$100	\$
\$50	\$
+	·
\$250	\$
\$50	\$
TOTAL:	\$
	\$4,000 \$3,500 \$3,500 \$3,500 \$3,500 \$3,500 \$2,500 \$2,000 \$1,500 \$600 \$500 \$200 \$200 \$50 \$100 \$50 \$250

Credit Card Authorization:

Name on Card: ______ Phone: ______

Card #: _____ Exp: ___/ ___ CVV: _____ Zip: _____

Email form to: api@corpuschristiapi.org

Mail checks to: Corpus Christi API PO Box 9235 Corpus Christi, TX 78469