

Summit Golf Outing

Monday, September 28, 2026



Gulf Shores Golf Club

Check In: 8:30 AM

Tee Time: 9:00 AM w/ Shotgun Start

Golf Only Registration

Primary Contact:	Title:
Company:	
Mailing Address:	
City, State, ZIP:	
Work Phone:	Email:

GOLFER NAME:	Golf (\$110/person)	Sponsorship
_____	☐	_____ X \$100
_____	☐	
_____	☐	
_____	☐	
TOTALS:	_____	Company name to appear on signage: _____

Total Golfers	X \$110 =	_____
Total Golf Sponsorships	X \$100 =	_____
TOTAL DUE		_____

Payment Information: ☐ Charge credit card below ☐ Send me an invoice	
☐ Visa ☐ Mastercard ☐ Discover ☐ American Express	
Card#	
Sec #	Exp. Date:
Name on Card:	
Cards Billing Address:	
Amount Charged:	Signature:

Make Checks Payable To:

ACTS
PO Box 644
Conway, AR 72033

Canceling before 8/28/26 will receive a refund, less a non-refundable \$100 deposit. No refunds will be issued after this date.

Charge will show ACTS
NOW on statement.

For more information, visit <http://www.alabama.damagepreventionsummit.com/>, call ACTS at 501-548-6363, fax 501-548-6969 or email thesummit@aligningchange.com