

# Ninth Annual TAAP Golf Tournament

As part of the 47th Annual State TAAP Conference on Addiction Studies



**Wednesday, September 8, 2021 - 8:00 a.m. Shotgun Start**  
Registration begins at 7 a.m.

## Hill Country Golf Club at the Hyatt Regency Hill Country Resort and Spa

The Hill Country Golf Club is a 27-hole course carved out of the Texas Hill Country landscape promising a challenging and rewarding golf adventure. Set on 300 lush acres, the golf club offers a diverse terrain, with rolling meadows, steep hillsides, wooded ravines, tree-shaded plateaus and the tranquil threat of lakes and ponds.

Ranked the #1 Texas golf destination and #17 worldwide by Condé Nast Traveler, Hill Country Golf Club is an unforgettable golf experience in San Antonio, Texas.

## Tournament Registration



Category	Cost	Benefits
Single Golfer/Golfers	\$150/person	See benefits below
Team of 4 Golfers	\$600	See benefits below
Hole Sponsor	\$150/hole or \$250/2 holes	Sponsor sign at tee box, listed in sponsor acknowledgments
Hole Sponsor with Team of 4 Golfers	\$700/hole	Sponsor sign at tee box, listed in sponsor acknowledgments

### Benefits for all golfers include...

- Golf and cart
- Access to locker rooms and showers
- VIP parking and bag handling
- 15% discount on all merchandise purchased in pro shop day of tournament
- Unlimited access to practice areas and driving range prior to tournament start



**Indicate category and enclose payment. You may register a single golfer, golfers, a team, or a hole sponsor or team/hole sponsor.**

- ☐ \$150 for single golfer or \$\_\_\_\_\_ for \_\_\_\_\_ golfers
 ☐ \$700 Hole Sponsor (includes team of 4 golfers)
- ☐ \$150 Hole Sponsor
 ☐ \$250/2 Hole Sponsor
- ☐ \$600 Team of 4 golfers

Golfer #1 \_\_\_\_\_ Handicap \_\_\_\_\_ Email \_\_\_\_\_

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Name on sign for Hole Sponsor \_\_\_\_\_

### Payment Information Please return form & payment to [admin@taap.org](mailto:admin@taap.org) or PO Box 342343, Lakeway, TX 78734

☐ Enclosed is my check (payable to TAAP) Check # \_\_\_\_\_

For Credit Card Payment, Please FILL OUT THE FOLLOWING INFORMATION:

Card # \_\_\_\_\_

☐ VISA
 ☐ MasterCard
 ☐ Discover
 ☐ AMEX

Name on Card \_\_\_\_\_ Exp. Date \_\_\_\_\_ CVV \_\_\_\_\_

Billing Address \_\_\_\_\_ City/State/Zip \_\_\_\_\_

Authorized Signature \_\_\_\_\_

