

# Builder Classic Golf Tournament

Presented by the NC Home Builders Educational & Charitable Foundation, Inc

## TEAM ENTRY FORM 2025

Team Captain #1 First: \_\_\_\_\_ Last: \_\_\_\_\_

Company: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: ( ) \_\_\_\_\_ E-mail: \_\_\_\_\_

Player #2 First: \_\_\_\_\_ Last: \_\_\_\_\_

Company: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: ( ) \_\_\_\_\_ E-mail: \_\_\_\_\_

Player #3 First: \_\_\_\_\_ Last: \_\_\_\_\_

Company: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: ( ) \_\_\_\_\_ E-mail: \_\_\_\_\_

Player #4 First: \_\_\_\_\_ Last: \_\_\_\_\_

Company: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: ( ) \_\_\_\_\_ E-mail: \_\_\_\_\_

### Players & Teams

Registration packages include:

Green Team Sponsorship: \$865  
Green Sign  
4 Player Registrations  
1 Mulligan per player  
Breakfast, Lunch & Carts

Red Skirt Package: \$760  
4 Player Registrations  
1 Red Skirt per player  
Breakfast, Lunch & Carts

Single Player(s): \$190  
Lunch & Cart (includes 1  
Mulligan OR 1 Red Skirt)

Mulligan \$10 /pp

Red Skirt: \$10/pp

Total Amount Due: \$ \_\_\_\_\_

***Space is Limited  
First Come, First Serve***

**Mail:** NCHBA, P. O. Box 99090, Raleigh, NC 27624

**Fax:** (919) 676-0402

**Email:** tgarrett@nchba.org

**Additional Information:** Tracie Garrett ● (919) 676-9090 ● tgarrett@nchba.org

### — Use this form as your Invoice —

**Payment Type:** Check# \_\_\_\_\_  Visa  MasterCard  Amex Amount Authorized: \$ \_\_\_\_\_

Card Number: \_\_\_\_\_ Expiration Date: \_\_\_\_\_

Name on Card: \_\_\_\_\_ CSV#: \_\_\_\_\_

Billing Address for Card: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ Signature for Authorization: \_\_\_\_\_

**Make checks payable to: NC Home Builders Educational & Charitable Foundation, Inc (NCHBECF)**

### FOR NCHBA USE ONLY

Date Received: \_\_\_\_\_ Check # \_\_\_\_\_ Amount Received: \_\_\_\_\_

Payee: \_\_\_\_\_