



# NKF Golf Classic

1 p.m. Wednesday, May 14, 2008  
Leawood South Country Club

The NKF Golf Classic pro-am is a qualifier for the National NKF Championship at Pebble Beach Golf Links. Teams trying to win the opportunity to advance must meet specific handicap guidelines; the four amateur players must have a combined USGA Handicap Index of 42.0 or higher, and only one team member may have a USGA Handicap Index of 8.0 or less. Handicaps will be verified on the date the entry is received.

Teams and Individuals not seeking to qualify are welcome to enter the NKF Golf Classic, and need not include handicap information. All teams will be paired with a FUTURES Tour pro.

Player #1 Name: \_\_\_\_\_ Email: \_\_\_\_\_  
Home Address: \_\_\_\_\_ GHIN# \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Day Phone: \_\_\_\_\_ Evening Phone: \_\_\_\_\_  
USGA Handicap Index: \_\_\_\_\_ Golf Assoc. Name: \_\_\_\_\_ Course phone #: \_\_\_\_\_  
Home Course: \_\_\_\_\_ Head Pro: \_\_\_\_\_

Player #2: \_\_\_\_\_ Email: \_\_\_\_\_  
Home Address: \_\_\_\_\_ GHIN# \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Day Phone: \_\_\_\_\_ Evening Phone: \_\_\_\_\_  
USGA Index: \_\_\_\_\_ Golf Assoc. Name: \_\_\_\_\_ Course phone #: \_\_\_\_\_  
Home Course: \_\_\_\_\_ Head Pro: \_\_\_\_\_

Player #3: \_\_\_\_\_ Email: \_\_\_\_\_  
Home Address: \_\_\_\_\_ GHIN# \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Day Phone: \_\_\_\_\_ Evening Phone: \_\_\_\_\_  
USGA Index: \_\_\_\_\_ Golf Assoc. Name: \_\_\_\_\_ Course phone #: \_\_\_\_\_  
Home Course: \_\_\_\_\_ Head Pro: \_\_\_\_\_

Player #4: \_\_\_\_\_ Email: \_\_\_\_\_  
Home Address: \_\_\_\_\_ GHIN# \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Day Phone: \_\_\_\_\_ Evening Phone: \_\_\_\_\_  
USGA Index: \_\_\_\_\_ Golf Assoc. Name: \_\_\_\_\_ Course phone #: \_\_\_\_\_  
Home Course: \_\_\_\_\_ Head Pro: \_\_\_\_\_

**Team entry fee: \$2,500**

A portion of your entry fee may be tax deductible.

**Please mail this form with a check for your entry fee, or fax with your billing information to:**

**National Kidney Foundation of Kansas and Western Missouri  
6405 Metcalf Avenue, Suite 204 • Overland Park, KS 66202  
Fax: 913.722.4841 • Telephone: 913.707.4653**