



DAIRY BUSINESS  
ASSOCIATION | DAIRY  
FORWARD

# DAIRY GOLF CLASSIC



## LAKE ARROWHEAD GOLF COURSE Nekoosa, Wis. August 13, 2020

Register at [dairyforward.com](http://dairyforward.com)



# JOIN US FOR ANOTHER EXCITING EVENT!



## 01 LOCATION

### LAKE ARROWHEAD GOLF COURSE 1195 APACHE LN NEKOOSA, WI 54457

One of the Midwest's best, award-winning courses, Lake Arrowhead features two 4 1/2 star championship courses. Both will be used at the Dairy Golf Classic!



## 02 SCHEDULE

### THURSDAY, AUGUST 13, 2020

10 AM Registration and contests  
11 AM Shotgun start (lunch provided)  
5 PM Social hour, dinner and awards



## 03 LODGING

### HOTEL MEAD & CONFERENCE CENTER

Room pricing: \$125/night (Thursday)

Cut-off date for this room block is July 23

Call (800) 843-6323, reference Dairy Business Association



## 04 GOLF INFORMATION

### \$150/PERSON or \$600/FOURSOME

After July 24, \$175/person and \$700/foursome

#### FEE INCLUDES:

- » 18 holes of golf, cart and driving range
- » Lunch, social hour and dinner
- » Contests for men and women
- » Refreshments on the course
- » Drawings for prizes

**NON-GOLFERS:** \$50/person or \$75/person after July 24.  
Includes lunch, social hour, dinner and drawings for prizes.

# REGISTRATION INFORMATION

**ONLINE:** [dairyforward.com/DBAgolf](http://dairyforward.com/DBAgolf)

**MAIL THIS FORM TO:**

Dairy Business Association  
2763 Manitowoc Road, Suite B  
Green Bay, WI 54311



Event is held rain or shine. No refunds given due to weather. No carry-ins allowed!

For more information, contact Nicole Barlass at [nbarlass@dairyforward.com](mailto:nbarlass@dairyforward.com) or (920) 883-0020 x104

Team contact \_\_\_\_\_

Phone \_\_\_\_\_

E-mail \_\_\_\_\_

\_\_\_\_\_ @ \$150/golfer (\$175 after July 24)

\_\_\_\_\_ @ \$600/foursome (\$700 after July 24)

**GOLFER NAME**

**FARM/COMPANY**

1. \_\_\_\_\_

2. \_\_\_\_\_

3. \_\_\_\_\_

4. \_\_\_\_\_

**NON-GOLFER \$50/person (\$75 after July 24)**

1. \_\_\_\_\_

2. \_\_\_\_\_

**TOTAL AMOUNT ENCLOSED = \$ \_\_\_\_\_**

**PAYMENT INFORMATION:**

Check (payable to DBA)  Visa  MasterCard  Discover  AmEx

Name on Card \_\_\_\_\_

Card Number \_\_\_\_\_

Exp \_\_\_\_\_ CVV code \_\_\_\_\_

Billing address \_\_\_\_\_

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



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Presented by:

