2026 FALL GOLF TOURNAMENT

EVENT FOR SCHOLARSHIPS BENEFITING RURAL/COMMUNITY HOSPITALS IN TEXAS

AUG. 24
MONDAY | 2026

11:00 AM CHECK-IN
11:30 AM LUNCH
1:00 PM SHOTGUN START
5:30 PM PRIZES AWARDED

TORCH FOUNDATION

LINDSEY HORTON MEMORIAL

FOREST CREEK GOLF CLUB
99 TWIN RIDGE PARKWAY - ROUND ROCK, TX

$150 PER GOLFER

- FLIGHTED SCORING
- PRIZES AWARDED
- GIFT CARDS TO WINNERS

$50 — **"WHOOPS SPECIAL PACKAGE"**
- FOUR MULLIGANS
- BUBBA HOLE
- CLOSEST TO THE PIN
- 20 RAFFLE TICKETS

$10 — **"Á LA CARTE PACKAGE"**
- MULLIGAN, BUBBA HOLE OR CLOSEST TO THE PIN

MORE INFORMATION ONLINE AT TORCHNET.ORG

2026 TORCH FOUNDATION/LINDSEY HORTON MEMORIAL SCHOLARSHIP FUND

VENDOR REGISTRATION

Fall Golf Tournament Registration Form

Anyone can play golf, but they must be registered to attend the TORCH/TARHC Fall Conference.

Two registered vendor players per team. All registered vendor attendees can play golf. Vendors don't have to sponsor to play golf and all teams will be assigned by TORCH made up of vendors / hospital attendees.

AVAILABLE SPONSORSHIPS - CIRCLE LEVEL OF SPONSORSHIP

Bronze – $500 hole sponsor signage (18 hole course)

Silver – $1,000, includes 1 golfer complimentary, signage and website promotion

Gold – $2,000, includes 2 golfers complimentary, signage, website promotion and ability to add swag in attendee bags

Platinum – "Presented By" sponsor at $5,000.00, team of 4 golfers, ***(2 vendor participants and 2 hospital players)***, signage at the event, website promotion, and ability to add swag in attendee bags

ADDITIONAL ADD-ONS

❑ $150 per golfer x _____

❑ $50 Whoops Special x _____

á la Carte – $10 each choice

❑ Mulligan x _____ ❑ Bubba Hole x _____ ❑ Closest to the Pin x _____

Company/Organization Name: _____

Primary Golf Contact Person: _____

Email: _____ Phone: _____

Address: _____

City: _____ State: _____ ZIP: _____

Copy form if more than five registrants are playing golf.

Player #1 _____ Handicap/Average Score _____

Email Address _____ Phone _____

Player #2 _____ Handicap/Average Score _____

Email Address _____ Phone _____

Player #3 _____ Handicap/Average Score _____

Email Address _____ Phone _____

Player #4 _____ Handicap/Average Score _____

Email Address _____ Phone _____

Player #5 _____ Handicap/Average Score _____

Email Address _____ Phone _____

TORCH will send an invoice for Golf and Sponsorships. Teams will have 4 players, depending on turnout.

Send completed form to accounting@torchnet.org