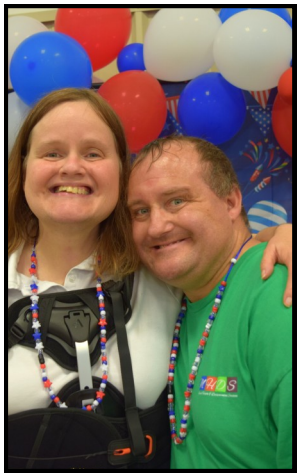
270+ Persons Supported



P O Box 11205
Jackson TN 38308-0120

MHDS

MHDS

Mental Health & Developmental Services

21st Annual Bob Brown Memorial Golf Scramble

Friday, October 2, 2026

Humboldt Golf & Country Club
4700 East Main Street
Humboldt TN 38343
Lounge: 731-784-9990
Pro Shop: 731-784-4127
www.humboldtgcc.com

Sponsored by

WesTN
WEST TENNESSEE BANK
– A Division of Decatur County Bank –

MHDS

Mental Health & Developmental Services

About the Tournament

Date: Friday, October 2, 2026
Shotgun Start

Format: Four (4) Person Scramble

Registration 10:30 am
Lunch 11 am
Tee Off Noon

Maximum capacity of Teams playing is 24. It is known that Humboldt CC has been rebuilding their Greens for 2 seasons but we have recently viewed them & consider them playable for the tournament..

Flight Prizes Per Player

	1st Flight	2nd Flight	3rd Flight
1st Place	$125	$100	$75
2nd Place	$75	$60	$45
3rd Place	$50	$40	$30

Special Prizes for Last Place!

Bob Brown's Impact

Pioneering Board Member, concerned parent, champion of those less fortunate are all fitting descriptors for Bob. We honor his legacy & memory with this event.

TOURNAMENT QUESTIONS?

Kim McFarland	kmcfarland@mhds.org	984.6405
Jeff Coley	jcoley@mhds.org	234.1274
Bill Brewer	billbrewer@eplus.net	267.2884
Blake Carden	bcarden@mhds.org	234.3611
Denny Dix	djdix@eplus.net	225.2379

Administration	Office	664.0855
27 Conrad Drive	Fax	668.2433
Jackson TN 38305	www.mhds.org	

Please complete and return by Friday, 9/18

TEAM NAME
BUSINESS OR ORGANIZATION

_____

Contact: _____

Mail: _____

City: _____ *Zip:* _____

Email: _____

Day Phone: _____

Cell: _____

PLAYER NAMES

Player 1: _____

Player 2: _____

Player 3: _____

Player 4: _____

TEAM/PLAYER FEES

_____ # Patron Teams x $1000 = $_____

Includes 4 Players, Hole Sign, Cart Sign, 1/2 Page Program Ad and Mulligans & Red Tees for each player

_____ # Team of 4 x $500 = $_____

_____ # Players x $125 = $_____

_____ # Mulligans (2 for $5) = $_____

_____ # Red Tee (1 for $5) = $_____

Your support is greatly appreciated!

ADVERTISING OPTIONS

Full Page Ad
(4 1/2 W x 7 1/2 H) #_____ x $300 = $ _____

Half Page Ad
(4 1/2 W x 3 1/4 H) #_____ x $ 150 = $ _____

Qtr Page/Card Ad
(3 1/4 W x 1 3/4 H) # _____ x $100 = $ _____

Hole Sign Ad # _____ x $125 = $ _____

Bogey Combo # _____ x $200 = $ _____
(Hole Sign/Card Ad)

Birdie Combo #_____ x $500 = $ _____
(Hole Sign/Half Ad/Cart Sign)

GOODY BAG

*Item: _____ #_____

RANDOM PRIZE

*Item: _____ #_____
*If $200 value, provide Card/Logo/artwork for ad

□ Card/Logo/artwork attached **OR**
□ Emailed to kmcfarland@mhds.org

REGISTER & PAY BY FRIDAY, 9/18

□ Donation $_____

TOTAL Enclosed OR $_____

□ Pay At Tournament
□ Invoice Me
□ PayPal at www.mhds.org (attach copy of receipt)

* Registration details also available at www.mhds.org

MHDS, P O Box 11205, Jackson TN 38308