



15th Annual OcTYberfest

September 27th, 2025

Golf Registration Form

REGISTRATION:

NAME: _____

NAME: _____

NAME: _____

NAME: _____

NAME: _____

NAME: _____

NAME: _____

NAME: _____

Number of Golfers _____ x \$125.00 = _____

Dinner Only _____ \$40 = _____

Make checks payable to the Ty Barberine Foundation and mail registration and payment to:

**Heather Barberine
2013 County Road C
Somerset, WI 54025**

Questions : 651-303-1044 or tybarberinefoundation@gmail.com