

IMARA *Charity* GOLF TOURNAMENT

2019

Tournament Sponsor



BlueStem Wealth Partners

Ameriprise Private Wealth Advisory Practice

Participant:

Name: _____

Address: _____

City: _____ **State:** _____ **Zip:** _____

Phone: _____

Email: _____

Check this box to receive information from BlueStem Wealth Partners.

Please Check One:

- Assign me to a team for golf
- I am playing with the team below
- I am registering for dinner only

Team Member: _____

Email: _____

Check this box to receive information from BlueStem Wealth Partners.

Team Member: _____

Email: _____

Check this box to receive information from BlueStem Wealth Partners.

Team Member: _____

Email: _____

Check this box to receive information from BlueStem Wealth Partners.

Please mail this form with a check for \$175 per golf participant or \$45 for dinner. Make checks payable to Imara International.

Print and Mail to:

Imara International

18253 64th Ave. N.

Maple Grove, MN 55311



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