



*Merchants Exchange
Grain Committee*



40th Annual Invitational Golf Tournament
Monday, June 2, 2025 – Riverside Golf & Country Club

PARTICIPANT INFORMATION

Name: _____ Company: _____
Address: _____ City: _____ State: _____ Zip: _____
Phone: _____ Email: _____

Golf, Dinner & Contests Package: Each registration includes 18 holes of golf, greens fees, cart, practice range use, & dinner following the event. The player will also receive the chance at (4) KP holes & (1) Long Drive contest.

Individual Players _____ @ \$195 per player = \$ _____
Foursome _____ @ \$750 per team = \$ _____

*** PRE-PURCHASED RAFFLE TICKETS:** 100% PROCEEDS BENEFIT THE MEX SCHOLARSHIP FUND. PRIZE EXAMPLES: Golf foursome(s); Winery / distillery tastings, gift baskets and certificates. THEMED gift baskets include Golf, Kitchen, Spa, Adult Beverage + more! The raffle drawings will occur at the MEX Annual Open House this Summer). Additional packages may be added with donor/sponsor support!

One Ticket _____ @ \$10 each = \$ _____
Set of 3 Tickets _____ @ \$25 per set = \$ _____
Set of 7 Tickets _____ @ \$50 per set = \$ _____

MULLIGANS!! Limit (2) mulligans (\$20) per player per 18 holes.

100% of these proceeds go directly to the MEX Scholarship Fund!

(2) Mulligans per player _____ @ \$20 per set = \$ _____

****GOLF SPONSORSHIPS:** Consider adding your company to the ranks of our Platinum, Gold, or Silver Sponsors! Please complete section below. **Sponsors will be listed on all advertising, registration forms, signage, and receive special recognition at Event!**

Platinum Sponsorship of \$500 + = \$ _____
Gold Sponsorship of \$250-\$499 = \$ _____
Silver Sponsorship of \$100-\$249 = \$ _____
Grand Total Enclosed = \$ _____

MULTIPLE PLAYERS / FOURSOME: (if registering a foursome, players 1&2 and 3&4 will share carts)

Player Name	Company	Email Address
1. _____	_____	_____
2. _____	_____	_____
3. _____	_____	_____
4. _____	_____	_____

Credit Card Information: (fill out name and address if different from above)

Name: _____ Company: _____
Address: _____ City: _____ State: _____ Zip: _____
Credit Card Type: _____ Credit Card Number: _____ Exp / CVV: _____ /

Please fax registration to 503.295.3660 or email to vis@pdxmex.com (preferred) by **May 28, 2025. No cancellations after May 28.** **Mail Payment to:** Merchants Exchange – 200 SW Market Street, Suite 190 – Portland, OR 97201 – Fax: (503) 295-3660
If you have any questions about this event, please contact Margerie Vis at (503) 220-2093 or vis@pdxmex.com. **In lieu of cancellation, registration transfers are encouraged.**