



Pee Dee Klays For Kids -- March 14, 2026

Registration Form

To be pre-registered, this form must be received by MARCH 8, 2026

Sponsors must be received by MARCH 8 for signage and plaques to be ready for event

Name: _____ Company Name: _____

Address: _____

Phone: _____ Email: _____

Please circle shooter class and t-shirt size

[Youth Class - 15 years of age and younger, Logger Class - You must own or work on a logging job, Regular (Lewis) Class - all others]

Platinum Sponsor \$2500 (up to 8 shooters)

Shooter Class

T-Shirt Size

Shooter's Name: _____	Youth - Logger - Regular	YS, YM, YL, S, M, L, XL, XXL, XXXL
Shooter's Name: _____	Youth - Logger - Regular	YS, YM, YL, S, M, L, XL, XXL, XXXL
Shooter's Name: _____	Youth - Logger - Regular	YS, YM, YL, S, M, L, XL, XXL, XXXL
Shooter's Name: _____	Youth - Logger - Regular	YS, YM, YL, S, M, L, XL, XXL, XXXL
Shooter's Name: _____	Youth - Logger - Regular	YS, YM, YL, S, M, L, XL, XXL, XXXL
Shooter's Name: _____	Youth - Logger - Regular	YS, YM, YL, S, M, L, XL, XXL, XXXL
Shooter's Name: _____	Youth - Logger - Regular	YS, YM, YL, S, M, L, XL, XXL, XXXL
Shooter's Name: _____	Youth - Logger - Regular	YS, YM, YL, S, M, L, XL, XXL, XXXL

Gold Sponsor \$1000 (up to 4 shooters)

Shooter Class

T-Shirt Size

Shooter's Name: _____	Youth - Logger - Regular	YS, YM, YL, S, M, L, XL, XXL, XXXL
Shooter's Name: _____	Youth - Logger - Regular	YS, YM, YL, S, M, L, XL, XXL, XXXL
Shooter's Name: _____	Youth - Logger - Regular	YS, YM, YL, S, M, L, XL, XXL, XXXL
Shooter's Name: _____	Youth - Logger - Regular	YS, YM, YL, S, M, L, XL, XXL, XXXL

Silver Sponsor \$500 (up to 2 shooters)

Shooter Class

T-Shirt Size

Shooter's Name: _____	Youth - Logger - Regular	YS, YM, YL, S, M, L, XL, XXL, XXXL
Shooter's Name: _____	Youth - Logger - Regular	YS, YM, YL, S, M, L, XL, XXL, XXXL

Bronze Sponsor \$250 (1 shooter)

Shooter Class

T-Shirt Size

Shooter's Name: _____	Youth - Logger - Regular	YS, YM, YL, S, M, L, XL, XXL, XXXL
-----------------------	--------------------------	------------------------------------

Please make checks payable to: McLeod Health Foundation

Mail to: Log A Load For Kids, 1841 Odom Lane, Blenheim, SC 29516

For Credit Card Payments:

Name On Card: _____ Expiration: _____

Card Number: _____ Sec. Code (3 digit code on back): _____

Thank you! We Look Forward To Seeing You There!