



## 10<sup>TH</sup> ANNUAL PORTAGE POLICE K9 GOLF OUTING



10<sup>TH</sup> ANNUAL PORTAGE POLICE

### K9 GOLF OUTING

SEPTEMBER 6, 2025 9:00 A.M.

PORTAGE COUNTRY CLUB, PORTAGE WI

THE PORTAGE POLICE DEPARTMENT K-9 UNIT WILL HOST THE 10<sup>TH</sup> ANNUAL K9 GOLF OUTING ON SATURDAY SEPTEMBER 6, 2025 AT THE PORTAGE COUNTRY CLUB, PORTAGE WI. PROCEEDS WILL GO TO SUPPORT THE K9 UNIT TO PAY FOR VET BILLS, EQUIPMENT, AND TRAINING.

THE GOLF OUTING EVENT IS FOR EVERYONE. PARTICIPANTS WILL ENJOY FOOD, HOLE PRIZES, AND VARIOUS RAFFLE EVENTS & PRIZES. JOIN US FOR OUR 10<sup>TH</sup> ANNUAL GOLF OUTING AND SUPPORT A GREAT CAUSE.

#### EVENT DETAILS:

- 9:00 A.M. SHOTGUN START
- 4 PERSON SCRAMBLE
- \$60.00 PER PERSON FEE IF MEMBER OF PORTAGE COUNTRY CLUB
- \$70.00 PER PERSON FEE FOR NON-MEMBERS
- LUNCH TO FOLLOW
- PRIZES AWARDED FOR 1<sup>ST</sup>, 4<sup>TH</sup> AND 7<sup>TH</sup> PLACE FINISHERS

#### SIGN-UP

- DEADLINE FOR SIGN-UP AUGUST 22, 2025
- REGISTER AT THE PORTAGE POLICE DEPARTMENT, PORTAGE COUNTRY CLUB, OR MAIL IN ATTACHED FORM
- MAKE CHECKS PAYABLE TO THE CITY OF PORTAGE K9 UNIT
- CONTACT OFC. JAKE KUBELT [JACOB.KUBELT@PORTAGEWI.GOV](mailto:JACOB.KUBELT@PORTAGEWI.GOV), OFC. ALEX ROYSE [ALEX.ROYSE@PORTAGEWI.GOV](mailto:ALEX.ROYSE@PORTAGEWI.GOV) OR LT. BEN NEUMANN AT 608-742-2174 EMAIL: [BENJAMIN.NEUMANN@PORTAGEWI.GOV](mailto:BENJAMIN.NEUMANN@PORTAGEWI.GOV)
- OR CONTACT MARK BRASKA AT 608-742-5121 EMAIL: [MBRASKA@PGA.COM](mailto:MBRASKA@PGA.COM)



[WWW.PORTAGEWI.GOV/POLICE/](http://WWW.PORTAGEWI.GOV/POLICE/)





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### SIGN-UP FORM



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### I WANT TO SIGN-UP!

TEAM NAME \_\_\_\_\_  
CONTACT NAME \_\_\_\_\_  
PHONE \_\_\_\_\_ E-MAIL \_\_\_\_\_

### FOURSOME MEMBERS

1. FULL NAME \_\_\_\_\_  
ADDRESS \_\_\_\_\_ CITY/STATE \_\_\_\_\_ ZIP \_\_\_\_\_  
PHONE \_\_\_\_\_ E-MAIL \_\_\_\_\_

2. FULL NAME \_\_\_\_\_  
ADDRESS \_\_\_\_\_ CITY/STATE \_\_\_\_\_ ZIP \_\_\_\_\_  
PHONE \_\_\_\_\_ E-MAIL \_\_\_\_\_

3. FULL NAME \_\_\_\_\_  
ADDRESS \_\_\_\_\_ CITY/STATE \_\_\_\_\_ ZIP \_\_\_\_\_  
PHONE \_\_\_\_\_ E-MAIL \_\_\_\_\_

4. FULL NAME \_\_\_\_\_  
ADDRESS \_\_\_\_\_ CITY/STATE \_\_\_\_\_ ZIP \_\_\_\_\_  
PHONE \_\_\_\_\_ E-MAIL \_\_\_\_\_

### PAYMENT

PAYMENT AND SIGN-UP FORM MUST BE RECEIVED BY AUGUST 22, 2025 SO WE CAN HAVE AN ACCURATE COUNT OF PARTICIPANTS

- CHECK (PLEASE MAKE CHECK PAYABLE TO THE CITY OF PORTAGE K9 UNIT, INCLUDE WITH THIS FORM)
- RETURN FORM TO: PORTAGE POLICE DEPARTMENT | ATTN: PORTAGE K9 UNIT | 117 W PLEASANT ST PORTAGE, WI 53901
- *DONATIONS ARE TAX DEDUCTIBLE*