





3rd Annual Veterans Day Golf Classic





Friday, November 7th, 2025 at Heritage Golf Links 4445 Britt Rd, Tucker, GA 30084



Located just minutes from downtown Atlanta, HGL is easily accessible from I-285 and I-85 in Tucker, GA. Originally opened in 1996 as "Heritage Golf Club," the golf course was nominated that year as one of the "Best New Golf Courses in America" by Golf Digest magazine. Today, the golf club still boasts one of the highest slope ratings in Georgia. The golf course at Heritage Golf Links is designed around a 20-acre lake, with water in play on several holes. The course's rolling terrain and dramatic elevation changes provide stunning vistas, and golfers of every skill level love playing our challenging yet fun layout.

8:00 AM – Registration & Practice/Warm Up/Breakfast
10:00 AM – Veteran's Day Golf Classic Shotgun Start (rain or shine)

- Breakfast and lunch with adult beverages
- Raffles, Mulligans, and hole activations
- Closest to the pin, hole-in-one, and longest drive contests for fantastic prizes
- Fabulous gift packs, awards, and prizes



Trading in a uniform for civilian clothes is never easy. And for the Warriors who don't have support, it can be overwhelming. Based in Atlanta, The Warrior Alliance is on a mission to simplify this major life transition.

Our Values

The Warrior Alliance core values are the principles that guide our choices as individuals and as an organization.



REGISTRATION (Deadline Friday November 3rd) I/We will participate in the: Return your registration form to: 3rd Annual Veterans Day Golf Tournament Foursome (\$1,000) _____ Attn: Scott McFarlane Veteran Foursome (\$500)_____ 800 Battery Ave SE, Suite 400, Atlanta, GA 30339 scottmcfarlane@680thefan.com Individual (\$200) _____ (p) 404.688.0068 Veteran Individual (\$100) (f) 404.995.4043 TOTAL ENCLOSED: \$_____ Check Enclosed (Make payable to: "Dickey Broadcasting Company") ___ Credit Card (Visa, MC, AMEX) Card Type _____ Card Number _____ Expiration Date ______ Security Code _____ Name on Card _____ Billing Address _____ Signature PLAYER REGISTRATION Name _____ Name _____ Company Name _____ Company Name _____ Address _____ Address _____ City _____ State ___ Zip ____ City _____ State ___ Zip ____ Phone _____ Phone _____ E-Mail _____ E-Mail _____ HCP# _____ HCP# Name _____ Company Name _____ Company Name _____ Address _____ Address _____ City _____ State ___ Zip ____ City _____ State ___ Zip ____

Phone _____

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