

# ENTRY FORM

## Country Meadows Senior Men's Club

### 2019 Charity Golf Classic

Supported by

### The LOHN FOUNDATION

Proceeds to the

## B.C. Cancer Foundation

For Prostate Cancer Research

# Friday, September 6, 2019.

Yes, I wish to enter the Tournament and have enclosed a cheque payable to "Country Meadows Charity Golf Classic" in the amount of \$ \_\_\_\_\_ for my/our entry.

Tournament entry fees: (Please check one) **"RAIN OR SHINE"**

- Single.....\$ 125 ( ) *For Your Information*
- Twosome.....\$ 250 ( ) *Because this is a*
- Threesome.....\$ 375 ( ) *Charitable event, we*
- Foursome (*with at least 1 man/ lady* .....\$ 500 ( ) *regret no refund is*
- Fivesome (*with at least 2 men/ladies*.....\$ 625 ( ) *possible.*

*Note: Teams consisting of fewer than 2 men/ ladies are not eligible for top 3 awards.*

**Participants:** (Full names please)

**Team Captain:** .....

Address: .....

Postal Code.....Phone:.....

Email: .....

( ) Tax receipt requested (Please check)

Name: .....

Address: .....

Postal Code.....

Phone.....

( ) Tax receipt requested (Please check)

Name: .....

Address: .....

Postal Code.....

Phone.....

( ) Tax receipt requested (Please check)

*Note: If tax receipt is required for full team entry (5) or Partial team (2-4) players, print name of person to receive the receipt.* \_\_\_\_\_

#### For Club Use Only

Date Rec'd. ....

Team No. ....

No. of Players

Men .....

Ladies .....

Players Needed

Men .....

Ladies .....

Singles and partial teams will be combined at the discretion of the Tournament Committee.

Tax receipts will be issued in accordance with Revenue Canada regulations in effect for charity events where prizes are awarded.

A tax receipt will be issued for any cash donation exclusive of entry fees. (See cash contributor/sponsor form)

Name: .....

Address .....

Postal Code .....

Phone.....

( ) Tax receipt requested (Please check)

Name: .....

Address: .....

Postal Code.....

Phone.....

( ) Tax receipt requested (Please check)

Check-in (by Team Number) will begin at 7:00 AM. Please check the Team Board upon arrival to find your name and team number. Team Captains (first name on the team roster) may check-in for all members of their team if all are present. Players who have been assigned to a team must check-in personally. Teams with fewer than five players due to late cancellations, no-shows, etc., may play but will be disqualified from team prizes and trophies

Please mail or give your entry to: Roy Lawson 10391 Seacote Rd. Richmond, B.C. V7A 4B4 . roylawson@shaw.ca  
NOTE: Please submit your prepaid registration a.s.a.p. as this is a first-come, first-served event and registration will be closed upon receipt of 145 paid entries.