

Golfer Registration Form

To Register:
 a. **Mail:** Community Care Northumberland – PO Box 1087 – 174 Oliver Rd,
Campbellford, Ontario K0L 1L0
 b. **Fax:** Attn: Alicia at (705)653-0932
 c. **Email:** Alicia at a.vandine@commcare.ca

				Column A	Column B	Column C
Golfer Name:	Address (For tax receipt purposes)	Phone #	Email:	Registration Fee \$125.00 per golfer	I want to pre-purchase an activity package* Add: \$20.00	Total Columns: A + B
1.				\$125.00	\$	\$
2.				\$125.00	\$	\$
3.				\$125.00	\$	\$
4.				\$125.00	\$	\$

<input type="checkbox"/>	Total	\$
<input type="checkbox"/>	Total Cheque Enclosed:	\$
<input type="checkbox"/>	Please forward an invoice in this amount to:	\$
	Name/Company Name:	
	Mailing Address:	
	City, Prov, Postal Code:	
<input type="checkbox"/>	Mastercard/Visa #	expiry date \$

1. Cheques should be made payable to **Community Care Northumberland**
2. Credit Card Option – if you prefer to call Community Care Northumberland with your # - (866-514-5774)
3. * Activity Packages will be available during registration, the day of the event

Any special dietary needs, please let us know prior to tournament: