



FOUNDATION

**14th ANNUAL CHARITY GOLF TOURNAMENT REGISTRATION FORM**

DATE: Friday, August 18, 2017

TIME: Registration/Lunch **11:30am** Shotgun Start **1pm**

COST: \$300 Per Person

COCKTAIL HOUR & DINNER TO FOLLOW / GOLF ATTIRE

---

**\*NEW FOR 2017** - a confirmation Email will be sent to you once this form is received. An E-Invoice will be sent to you in late July/early August requesting payment by credit card, if you wish to pay by cash or cheque please contact Paula at [paula@zubek.ca](mailto:paula@zubek.ca).  
Please fill in information for all players.

Name: \_\_\_\_\_

Name: \_\_\_\_\_

Telephone: \_\_\_\_\_

Telephone: \_\_\_\_\_

Email: \_\_\_\_\_

Email: \_\_\_\_\_

Tax Receipt: Yes \_\_\_\_\_ No \_\_\_\_\_

Tax Receipt: Yes \_\_\_\_\_ No \_\_\_\_\_

\*Is each player paying for own registration fees? Yes \_\_\_\_\_ No \_\_\_\_\_

If No, please provide the name to E-Invoice and the golfers to include: \_\_\_\_\_

Name: \_\_\_\_\_

Name: \_\_\_\_\_

Telephone: \_\_\_\_\_

Telephone: \_\_\_\_\_

Email: \_\_\_\_\_

Email: \_\_\_\_\_

Tax Receipt: Yes \_\_\_\_\_ No \_\_\_\_\_

Tax Receipt: Yes \_\_\_\_\_ No \_\_\_\_\_

\*Receipts will be issued if the Registration Fee exceeds the benefit received

**Email to:** [paula@zubek.ca](mailto:paula@zubek.ca) **Mail to:** The Georgian Bay Club Foundation, PO Box 40, Collingwood, Ontario L9Y 3Z4  
**Or Drop Off** at the Club Office