

Mail form and payment to:  
Heart House Hospice  
1-855 Matheson Blvd. East  
Mississauga, ON L4W 4L6

# Heart House Hospice Annual Charity Golf Classic

Seventh Annual Tournament  
Monday, August 16<sup>th</sup>, 2010

Fax to:  
905-712-4029

## Registration Form

The Country Club, Woodbridge  
(Formerly The Board of Trade Golf  
and Country Club)

### Golf Packages

Foursome - \$1,200 x \_\_\_ = \$ \_\_\_\_\_  
Foursome with 4 Game Cards - \$1,400 x \_\_\_ = \$ \_\_\_\_\_  
Foursome with a Hole Sponsorship - \$1,600 x \_\_\_ = \$ \_\_\_\_\_  
Foursome with a Hole Sponsorship and  
4 Game Cards - \$1,700 x \_\_\_ = \$ \_\_\_\_\_

### Sponsorship Opportunities

Title Sponsor - \$20,000 x \_\_\_ = \$ \_\_\_\_\_  
Golfer Gift Sponsor - \$10,000 x \_\_\_ = \$ \_\_\_\_\_  
Dinner Sponsor - \$5,000 x \_\_\_ = \$ \_\_\_\_\_  
Corporate Sponsor - \$3,500 x \_\_\_ = \$ \_\_\_\_\_  
Tee Sponsor - \$2,000 x \_\_\_ = \$ \_\_\_\_\_  
Golf Cart Sponsor - \$1,500 x \_\_\_ = \$ \_\_\_\_\_  
Top Golfers Prize Sponsor - \$1,500 x \_\_\_ = \$ \_\_\_\_\_  
Putting Contest Sponsor - \$1,500 x \_\_\_ = \$ \_\_\_\_\_  
Mulligan Sponsor - \$1,000 x \_\_\_ = \$ \_\_\_\_\_  
Game Card Sponsor - \$500 x \_\_\_ = \$ \_\_\_\_\_  
Hole Sponsor - \$400 x \_\_\_ = \$ \_\_\_\_\_

### Sponsor Contact Information

Name \_\_\_\_\_  
Company \_\_\_\_\_  
Title \_\_\_\_\_

#### Work Contact Information

Address \_\_\_\_\_  
City \_\_\_\_\_ Province \_\_\_\_\_ Postal Code \_\_\_\_\_  
Bus. Number \_\_\_\_\_ Fax Number \_\_\_\_\_  
Email \_\_\_\_\_

### Golfer Registration Information

(Please specify whether work or home information)

#### Golfer # 1

Name \_\_\_\_\_  
Address \_\_\_\_\_  
City \_\_\_\_\_ Province \_\_\_\_\_  
Postal Code \_\_\_\_\_ Phone \_\_\_\_\_  
Email \_\_\_\_\_

#### Golfer # 2

Name \_\_\_\_\_  
Address \_\_\_\_\_  
City \_\_\_\_\_ Province \_\_\_\_\_  
Postal Code \_\_\_\_\_ Phone \_\_\_\_\_  
Email \_\_\_\_\_

#### Golfer # 3

Name \_\_\_\_\_  
Address \_\_\_\_\_  
City \_\_\_\_\_ Province \_\_\_\_\_  
Postal Code \_\_\_\_\_ Phone \_\_\_\_\_  
Email \_\_\_\_\_

#### Golfer # 4

Name \_\_\_\_\_  
Address \_\_\_\_\_  
City \_\_\_\_\_ Province \_\_\_\_\_  
Postal Code \_\_\_\_\_ Phone \_\_\_\_\_  
Email \_\_\_\_\_

### Payment Method

Cheques (Please make cheques payable to Heart House Hospice)

Credit Card (check one)  Visa  Master Card

Card Number \_\_\_\_\_

Exp. Date \_\_\_\_\_ Amt. Authorized \$ \_\_\_\_\_

Print Name on Card \_\_\_\_\_

Signature Authorizing Charge \_\_\_\_\_

For more information  
Please contact Jennifer Hatton at  
(905) 712-8119 ext. 234 or [jhatton@hearthousehospice.com](mailto:jhatton@hearthousehospice.com)