

# Shedden's Annual Golf Invitational Registration

Space is limited - Register early to avoid disappointment!



**CONTACT:**

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**Mailing Address:**

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**\*Entry forms can be submitted electronically or by mail to address listed above**

**IMPORTANT INFORMATION:**

Tax Receipt: Receiptable amount of \$45 will be sent to address provided on entry form.

Cancellation: If player cancels before July 6 a full refund can be given. If a player is a 'no show,' entry fee is non-refundable.

Dress Code: Players are required to wear proper golf attire. Sweat suits, tank tops, jeans, gym shorts or cut-offs are not permitted. Shorts must be proper golf shorts. Black Diamond reserves the right to cancel green fee for any violation.

**DATE:** Saturday July 21, 2018  
**TIME:** Registration at 10:30am  
Shotgun start 12noon  
**PLACE:** Black Diamond Golf Club  
705 Pontypool Road Pontypool ON,  
L0A 1K0

**ENTRY FEE:** \$150 (includes BBQ lunch, cart, 18 holes, buffet dinner and contribution to United Way)

**\*\*\*Form and payment due June 29, 2018\*\*\***  
Payment options on following page

**Format:** Scramble with 4-person team.  
If you do not enter a team list, you will be placed with others.

**ENTRY FORM:**

**Team Captain**

**Name:** \_\_\_\_\_  
**Company:** \_\_\_\_\_  
**Address:** \_\_\_\_\_  
**City:** \_\_\_\_\_  
**Postal Code:** \_\_\_\_\_  
**Telephone:** \_\_\_\_\_  
**Email:** \_\_\_\_\_

**Team Members:**

Player 2 Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_  
Postal Code: \_\_\_\_\_

Player 3 Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_  
Postal Code: \_\_\_\_\_

Player 4 Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_  
Postal Code: \_\_\_\_\_

*\*all information required for tax receipting*



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## PAYMENT INFORMATION

\$150 per golfer. Price includes BBQ lunch, power cart, 18 holes, buffet dinner.

- Cash
- Cheque – *please make payable to United Way Peterborough & District*
- Credit Card – *please complete information below*

Credit Card Information:

VISA       MasterCard

CARD #: \_\_\_\_\_ EXP: \_\_\_\_\_

NAME OF CARDHOLDER: \_\_\_\_\_ CVV: \_\_\_\_\_

SIGNATURE: \_\_\_\_\_

Thank you for registering! We look forward to seeing you July 21!



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