Get Out For Some Golf And A Great Cause!

Adaptive Sports & Recreation Charity Golf Tournament

DATE Wednesday, November 6, 2013

TIME

Check-in starts at 12 noon Tee time is 1 pm shotgun

PLACE

Country Club of Rancho Bernardo 12280 Greens East Road San Diego, CA 92128



ENTRY FEE

\$550 Foursome \$150 Single Player * Includes lunch & catered post event dinner *Additional \$25 to bring a guest for dinner

FORMAT

Scramble

Have some fun and join us for the Adaptive Sports & Recreation Association Charity Golf Tournament benefiting children and adults with physical disabilities through sports and recreation. A fun-filled day is planned, complete with contests and an awards dinner. Bring together friends and clients to help us raise funds for a great cause. We hope you can join us!





PLAYER INFORMATION

Player 1	Phone	
Company	Email	
Address	Handicap	

TEAM INFORMATION

Player 2	Phone	Email	Handicap	
Player 3	Phone	Email	Handicap	
Player 4	Phone	Email	Handicap	

SPONSORSHIP OPPORTUNITIES

-	your support and participatio cal disabilities. Your contributax deductible.				
	500 sponsor of the tournament in m and at the awards banquet		ting materia	ls, recogniz	zed
	6 750 of the Awards Dinner in all p and at the awards banquet.	romotiona	l materials,	recognized	l in
0 1	ed on a golf shirt that will be go at the awards banquet.	given to all	players, rec	ognized in	the
☐ Beverage Cart Spor	nsor - \$500 rage Cart sponsor in the even	t program	and on the	beverage c	art.
) logo included on all sleeves o l in the event program and at	_	_	en to	
-	\$250 sor of the putting, long drive and at the awards banquet.	or hole-in-	-one contest,	recognize	d in
☐ Hole Sponsor - \$25 Named as Hole Sponsign.	0 onsor in the event program ar	nd compan	y or individ	ual name c	on one hole
-	ation: \$ tions are very important to th unds for this very worthy cau		of the tourna	ment and	to
PAYMENT INFOR	MATION				
☐ Check Enclosed (Mad	le payable to Adaptive Sports &	Recreation	Association)		
☐ Bill Credit Card (Visa	, MasterCard, Discover, Amex)				
Amount \$					
Card Number		CVV		Exp.	
Cardholder Name					
Cardholder Address					
City, State, Zip					
Cardholder Signature					

Send Completed Form To: