

**Circle of Friends 24<sup>th</sup> Annual Golf Tournament**  
**Northridge Golf Course**  
**THURSDAY, AUGUST 18<sup>th</sup>, 2011**

**In Support of Community Living Brant**

Date received:

Amount:

All-inclusive REGISTRATION FEE IS \$135.00 includes 18 holes of golf, golf cart, light lunch, roast beef and chicken, and the player's package. The player package includes two mulligans, two chances at the putting contest, and your prize. Charitable tax receipts will be issued in the amount of \$40.00.

**Please Note: We do require complete names and mailing addresses to issue tax receipts – please check off business or personal for tax purposes.**

Registration 11:00am / Lunch 11:30am / Shotgun Scramble Start at 1:00pm

**TEAM NAME:**

|                                     |                                |   |                                |   |  |
|-------------------------------------|--------------------------------|---|--------------------------------|---|--|
| #1 Player Information               |                                | <input type="checkbox"/> Tax Receipt Business |                                | <input type="checkbox"/> Tax Receipt Personal |  |
| <input type="checkbox"/> Team Entry | <input type="checkbox"/> Mens' | <input type="checkbox"/> Ladies'              | <input type="checkbox"/> Mixed | <input type="checkbox"/> Single Entry         |  |
| Name                                |                                | <input type="checkbox"/> Cheque               | <input type="checkbox"/> Visa  | <input type="checkbox"/> Cash                 |  |
|                                     |                                | <input type="checkbox"/> MasterCard           |                                |   |  |
| Address                             |                                | Cardholder's Name                             |                                |   |  |
| City                                |                                | Card Number                                   |                                |   |  |
| Postal Code                         |                                | Expiry Date                                   |                                |   |  |
| Telephone                           |                                | Signature                                     |                                |   |  |

|                                     |                                |   |                                |   |  |
|-------------------------------------|--------------------------------|---|--------------------------------|---|--|
| #2 Player Information               |                                | <input type="checkbox"/> Tax Receipt Business |                                | <input type="checkbox"/> Tax Receipt Personal |  |
| <input type="checkbox"/> Team Entry | <input type="checkbox"/> Mens' | <input type="checkbox"/> Ladies'              | <input type="checkbox"/> Mixed | <input type="checkbox"/> Single Entry         |  |
| Name                                |                                | <input type="checkbox"/> Cheque               | <input type="checkbox"/> Visa  | <input type="checkbox"/> Cash                 |  |
|                                     |                                | <input type="checkbox"/> MasterCard           |                                |   |  |
| Address                             |                                | Cardholder's Name                             |                                |   |  |
| City                                |                                | Card Number                                   |                                |   |  |
| Postal Code                         |                                | Expiry Date                                   |                                |   |  |
| Telephone                           |                                | Signature                                     |                                |   |  |

|                                     |                                |   |                                |   |  |
|-------------------------------------|--------------------------------|---|--------------------------------|---|--|
| #3 Player Information               |                                | <input type="checkbox"/> Tax Receipt Business |                                | <input type="checkbox"/> Tax Receipt Personal |  |
| <input type="checkbox"/> Team Entry | <input type="checkbox"/> Mens' | <input type="checkbox"/> Ladies'              | <input type="checkbox"/> Mixed | <input type="checkbox"/> Single Entry         |  |
| Name                                |                                | <input type="checkbox"/> Cheque               | <input type="checkbox"/> Visa  | <input type="checkbox"/> Cash                 |  |
|                                     |                                | <input type="checkbox"/> MasterCard           |                                |   |  |
| Address                             |                                | Cardholder's Name                             |                                |   |  |
| City                                |                                | Card Number                                   |                                |   |  |
| Postal Code                         |                                | Expiry Date                                   |                                |   |  |
| Telephone                           |                                | Signature                                     |                                |   |  |

|                                     |                                |   |                                |   |  |
|-------------------------------------|--------------------------------|---|--------------------------------|---|--|
| #4 Player Information               |                                | <input type="checkbox"/> Tax Receipt Business |                                | <input type="checkbox"/> Tax Receipt Personal |  |
| <input type="checkbox"/> Team Entry | <input type="checkbox"/> Mens' | <input type="checkbox"/> Ladies'              | <input type="checkbox"/> Mixed | <input type="checkbox"/> Single Entry         |  |
| Name                                |                                | <input type="checkbox"/> Cheque               | <input type="checkbox"/> Visa  | <input type="checkbox"/> Cash                 |  |
|                                     |                                | <input type="checkbox"/> MasterCard           |                                |   |  |
| Address                             |                                | Cardholder's Name                             |                                |   |  |
| City                                |                                | Card Number                                   |                                |   |  |
| Postal Code                         |                                | Expiry Date                                   |                                |   |  |
| Telephone                           |                                | Signature                                     |                                |   |  |

**PLEASE MAKE CHEQUES PAYABLE TO:**

Community Living Brant

366 Dalhousie Street, Brantford, ON N3S 3W2 Phone: (519) 756-2662 / Fax: (519) 756-7668