



# WSSHE Southwest Chapter 3<sup>rd</sup> Annual Golf Tournament Thursday, September 9<sup>th</sup>, 2010



## Golfer Registration Form

**McCormick Woods Golf Course** - 5155 McCormick Woods Dr SW - Port Orchard, WA 98367  
**Golfer Check-In 11:00AM - Shotgun Start 1:00PM / Awards Dinner 5:30PM – 8:00PM**

Golf & Dinner Registration (subject to confirmation)		
Name	Company	Flight (beginner, intermediate, or advanced)
1.		
2.		
3.		
4.		

**Come play a round of golf and then join us in the clubhouse for our chapter dinner and annual meeting.  
There will be gifts, contents and plenty of fun for everyone!**

Contact Person		
Provide the person responsible for changes, cancellations and dissemination of information to registered golfers.		
Name: _____	Company: _____	
Phone: (    ) _____	Fax: (    ) _____	E-Mail: _____

**Enclosed fees:**

# of Golfers \_\_\_\_\_ \$40 per person \$ \_\_\_\_\_  
**(Dinner provided by SW Chapter of WSSHE)** Total \$ \_\_\_\_\_

**Payment Options:**

\_\_\_ Check enclosed for payment in full payable to: "WSSHE SW Chapter"  
 \_\_\_ Send invoice to above name and address.  
 \_\_\_ Bill my Visa/MasterCard #: \_\_\_\_\_ Expiration: \_\_\_\_\_  
 Name as it appears on card: \_\_\_\_\_ CV#: \_\_\_\_\_  
 Signature(s): \_\_\_\_\_ Date: \_\_\_\_\_

**To reserve your Golfers send completed registration form via:**

**Fax:** 253-265-3043      **Mail To:** WSSHE SW Chapter      **E-mail:** [aminc2@comcast.net](mailto:aminc2@comcast.net)  
 Attn: Katie Bohocky  
 P.O. Box 6906  
 Tacoma, WA 98417

**All gofer names are needed by the August 27<sup>th</sup> deadline. Cancellation deadline is August 27<sup>th</sup>. No refunds or credits after 8/27/10.  
 Please send in your payment with this form to reserve your place. No reservations will be accepted without payment.**