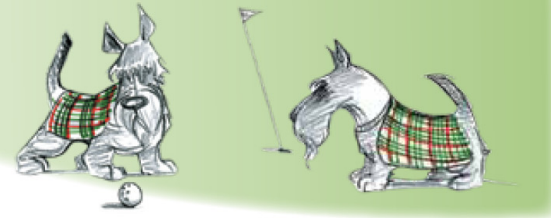


# 17<sup>th</sup> ANNUAL Leacock Club

Golf Tournament Dinner and Auction

Monday, September 13<sup>th</sup>, 2010 Angus Glen Golf Club and Auberge du Pommier



## Golfer Registration Form

Please complete this form and fax it to (416) 489-9398

For assistance with registration, please contact:

Alexandra Moorshead or Whitney Doldron • (416) 489-9309 • [golf@leacockfoundation.org](mailto:golf@leacockfoundation.org)

### Golfer Information

How many people are you registering for today?	<input type="radio"/> Foursome - \$2,200	<input type="radio"/> Twosome - \$1,100	<input type="radio"/> Single golfer - \$550
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Please provide us information for each golfer in your group.

<b>MAIN CONTACT</b>	Main contact's name		
	Company name		
	Email address	Phone number	

OTHER GOLFERS	GOLFER 2	GOLFER 3	GOLFER 4
The main contact is covering the registration fee for this golfer <input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> n/a <input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> n/a <input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> n/a			
Golfer's name			
Company name			
Email address			
Phone number			
I don't know who this golfer is. Please contact me closer to the event for that information <input type="radio"/> Yes <input type="radio"/> Yes <input type="radio"/> Yes			

Would you like us to place you with another golfer/group that is registering separately?	<input type="radio"/> No <input type="radio"/> Yes, please pair me/us with:
Please indicate your preferred format of play	<input type="radio"/> Best ball <input type="radio"/> Scramble

### Dinner Guest Information

We have limited space for dinner-only guests. Do you intend to invite guests to join you for dinner?

- No
- Yes, I would like to register one dinner guest - \$125
- Yes, I would like to register two or more dinner guests, please call me.

<b>DINNER GUESTS</b>	Guest's name(s)	
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1560 Bayview Avenue, Suite 205  
Toronto, Ontario M4G 3B8

t: 416-489-9309 f: 416-489-9398 e: [auction@leacockfoundation.org](mailto:auction@leacockfoundation.org)



# Golfer Registration Form, continued

Please complete this form and fax it to (416) 489-9398

## Sponsorship

Our event would not be possible without the support of individual and corporate sponsors. Please review the options listed below and consider whether there is sponsorship level that matches your objectives.

- Major sponsorship - \$10,000
- Champagne brunch at Angus Glen - \$3,500 *Sold!*
- Golfer gifts - \$2,500
- Angus Glen on-course beverage carts - \$2,500 *Sold!*
- Hole sponsorship - \$500
- I would like more information about sponsoring the event. Please contact me at the coordinates I am providing you below.

<b>SPONSOR CONTACT</b>	Contact name		
Email address		Phone number	

<b>RECOGNITION</b>	Sponsoring company or individual's name as it should appear for signage and program
Name	

## Payment Details

Payment is due to complete your registration.

### Forms of Payment

I will pay by cheque. Please make cheques for the Golf Tournament/Dinner and Sponsorships payable to "The Leacock Club" and mail to:  
The Leacock Club  
1560 Bayview Avenue, Suite 205  
Toronto, ON M4G 3B8.

### Payment Calculator

Golfer registrations	\$550/golfer	
Non-golfing dinner guests	\$125/guest	
Sponsorships	Pricing above	
Total		

I will pay by credit card

<b>CREDIT CARD INFO</b>	Card type	<input type="radio"/> Visa <input type="radio"/> MasterCard <input type="radio"/> American Express	
Cardholder's name			
Card number		Expiry date	

Thank you for your patronage of the 17th Annual Leacock Club Golf Tournament, Dinner and Auction in support of the Stephen Leacock Foundation for Children. Should you have an emergency situation arise and can no longer play you should know that the Leacock Club will provide full refunds to guests who notify of us in writing of their intention to cancel their golf registration 14 days in advance of the event.