



LBMAO CENTRAL DISTRICT ANNUAL GOLF TOURNAMENT & DINNER

Thursday, August 5, 2010

ATTENTION: SALES REPS & RETAILERS

LOCATION: Trillium Wood Golf Course, 1281 Hwy 37 (north of Belleville)
FORMAT: Team Best Ball

TIME: *Please come early!* Registration: 11:00 am – 12:30 pm; Lunch: Approx. 11:30 am – noon; Shotgun start: 1:00 pm, Dinner: Approx. 5:30-6:00 pm, **Cash Bar**

COST: Golf, Meals, Power Cart: \$145.30
Meals Only \$ 59.20
**HST INCLUDED HST (#R105225775)*



SPECIAL NOTES:

- PRIZES:** To ensure that everyone receives a prize, we request that all golfers bring a prize. Please bring something that you would choose for yourself.
- Sponsorship of holes @ \$100.00 per hole** or other "value added" features are invited and encouraged ie. – Closest to the pin, etc. Contact Dwayne Sprague, Rashotte Home Building Centre, (613) 478-2539 for details.
- Alcoholic beverages are available on the course, but **NO COOLERS ARE PERMITTED.**
- Dress code in effect. Soft spikes mandatory!!!**
- EVERY REGISTRATION AUTOMATICALLY GIVES YOU A CHANCE TO WIN A \$2000 TRAVEL VOUCHER!!** (\$10.00 will be donated to the LBMAO Student Achievement Award Program)

TO REGISTER: Please fill in and return this form accompanied by method of payment to the LBMAO office by July 22, 2010 at: **5155 Spectrum Way, Unit 27, Mississauga, ON L4W 5A1 Phone: (905) 625-1084, TF (888) 365-2626, Fax: (905) 625-3006.** Please make cheque payable to the LBMAO.

Contact Name: _____ Company: _____
Address: _____ City: _____ Postal Code: _____
Tel: _____ Fax: _____ E-Mail: _____

Team Information:

Name & Company	Golf & Meals	Meals Only
_____	<input type="checkbox"/>	<input type="checkbox"/>
_____	<input type="checkbox"/>	<input type="checkbox"/>
_____	<input type="checkbox"/>	<input type="checkbox"/>
_____	<input type="checkbox"/>	<input type="checkbox"/>

Payment Information: Cheque VISA Master Card

Enclosed please find payment in the amount of \$ _____ covering _____ persons.

Card #: _____ Expiry: _____

Card Holder Name: _____ Signature: _____

Card Holder e-mail for credit card receipt _____