

Annual "Golf Fore Care" Tournament at Wildfire Golf

| To Register: | | | | | |
|--------------|--|---------------------------------------|--|----------|---------------------|
| Box 30 | inity Care (Apsley (3, 126 Burleigh St. kbryck@commcarept | Apsley, On KOL 1A0 Box 001, 40 Ral | e (Lakefield office) obit St. Lakefield, On KOL | 2H0 | Registration Fee |
| S. Lindin | | | | | |
| Golfer Name: | | Address (For tax receipt purposes) | Phone # | Email: | \$250.00 per golfer |
| 1. | | | | | \$250.00 |
| 2. | | | | | \$250.00 |
| 3. | | | | | \$250.00 |
| 4. | | | | | \$250.00 |
| | Total | | | | \$ |
| | Total Cheque Enclosed: | | | | \$ |
| | Please forward an invoice in this amount to: | | | | \$ |
| | Name/Company Name: | | | | |
| | Mailing Address: | | | | |
| | City, Prov, Postal Code: Phone | | | | |
| | Mastercard/Visa # | | expiry date C | CVV Code | \$ |

1. Cheques should be made payable to Community Care Peterborough

2. Credit Card Option – if you prefer to call Community Care offices with your card number, call (705)656-4589 or (705)652-8655

Any special dietary needs, please let us know prior to tournament: