

# REGISTRATION & SPONSORSHIP FORM



**Friday, June 12, 2020**  
**Edmundston Fraser Golf Club**

## Registration (Team leader)

Name: \_\_\_\_\_  
 Company: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 Tel.: \_\_\_\_\_  
 Email: \_\_\_\_\_

**Group registration - Foursome** (Includes dinner) \_\_\_\_\_ 600 \$ \_\_\_\_\_  
 Golf cart rental (Foursome) \_\_\_\_\_ 160 \$ \_\_\_\_\_  
**Individual Registration** (Includes dinner) \_\_\_\_\_ 150 \$ \_\_\_\_\_  
 Golf cart rental **1 person** (2 pers. = \$80) \_\_\_\_\_ 40 \$ \_\_\_\_\_  
 Dinner only (Includes cocktail) \_\_\_\_\_ 40 \$ \_\_\_\_\_

## Participants (If you pay individually we will need your address and phone number)

Name	Address	Tel.
_____	_____	_____
_____	_____	_____
_____	_____	_____

## Sponsorship and donation

Hole Sponsorship (2'x 3' sign with logo) \_\_\_\_\_ at 500 \$ \_\_\_\_\_  
 Half Hole Sponsorship (1/2) \_\_\_\_\_ at 250 \$ \_\_\_\_\_  
 Recognition (DOCTORS) \_\_\_\_\_ at 500 \$ \_\_\_\_\_  
 Donation \_\_\_\_\_ \$ \_\_\_\_\_  
 Activities Sponsorship \_\_\_\_\_ \$ \_\_\_\_\_  
**TOTAL AMOUNT** \_\_\_\_\_ \$ \_\_\_\_\_

## Prize for the auction

I wish to give a prize for the auction: (Description): \_\_\_\_\_  
 \_\_\_\_\_  
 Value of prize: \_\_\_\_\_ \$

## Payment (in block letters)

- Cheque payable to the Edmundston Regional Hospital Foundation \_\_\_\_\_
- Credit card:      Mastercard            VISA

Card number: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
 Expiration: \_\_\_\_\_ / \_\_\_\_\_  
 Name: \_\_\_\_\_  
 Tel.: \_\_\_\_\_ (\_\_\_\_) \_\_\_\_\_ Signature : \_\_\_\_\_

## Important notes:

- All registrations will be treated by order of arrival at the Foundation office.
- A receipt will be issued to the payee according to the portion of the donation.
- Reimbursement Policy: **No refund.**



**9 :00 Registration**  
**10 :00 Shotgun**  
  
**5 :30 Cocktail**  
**6 :00 Dinner**  
**7 :00 Auctions**  
**8 :00 End of the evening**