



Wednesday, August 11th, 2010
 Summerheights Golf Links

Register Below

\$125.00 per person – Includes golf fees, power cart, Ploughman's Lunch, Progressive Supper fabulous selection of food plus entertainment, Country Auction, Ca\$h Prizes on holes and the popular Summerheights Paramedic Scramble.

No Foursome – No Problem – Let us make arrangements for you.

You can register in the following ways:

Visit us at: 510 Second Street (Near the Tuck Shop) or
Mail to: 840 McConnell Ave., Cornwall ON K6H 5S5
Email to: foundation@cornwallhospital.ca
Telephone: 613-930-4508
Fax: 613-930-4509

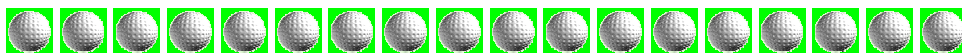
<p>Please provide all details to help us in receipting the eligible tax deductible portion of the fee. Reg. No. 89 406 5432RR0001</p>	
<p>Team Captain</p> <p>Name _____</p> <p>Address _____</p> <p>_____</p> <p>Telephone _____</p> <p>Email _____</p>	<p>Team Member 1</p> <p>Name _____</p> <p>Address _____</p> <p>_____</p> <p>Telephone _____</p> <p>Email _____</p>
<p>Team Member 2</p> <p>Name _____</p> <p>Address _____</p> <p>_____</p> <p>Telephone _____</p> <p>Email _____</p>	<p>Team Member 3</p> <p>Name _____</p> <p>Address _____</p> <p>_____</p> <p>Telephone _____</p> <p>Email _____</p>

Payment by – Cheque (Payable to CCH Foundation) Cash
 MasterCard Visa American Express Express

Card No.: _____ / _____ / _____ / _____ Expiry Date: ____/____

Amount: \$ _____ Name on Card: _____

MY PREFERRED TEE OFF TIME IS: _____ on the South Course



Thank you for your support. We will confirm details of your tee off time by return email.