

GOLFER REGISTRATION

Player # 1 (Captain)

Name _____

Company _____

Address _____

E-Mail _____

Player #2

Name _____

Player #3

Name _____

Player #4

Name _____

Make check payable to:

MH Foundation

Or please bill my credit card:

VISA Master Card

American Express Discover

Total Amount \$ _____

Card Account Number _____

Name on credit card (Please Print) _____

Authorized Signature (Below) _____

Expiration Date: ____/____

CVS Code _____

Massena Hospital Foundation
1 Hospital Drive, Massena, NY 13662
(315) 769-4273 or (315) 769-4602

Fax: (315) 769-4712

jfowler@massenahospital.org
jrose@massenahospital.org

34th

Annual

Massena Hospital Foundation Golf Tournament

August 25, 2022

The River Course At Louisville Landing (formerly Massena Country Club)

Rain or Shine



Tourney Schedule

Thursday

August 25, 2022

Schedule of Events

7:00AM – 8:00AM

Registration for Morning Tee-Off

8:00 AM

Tee off/Shotgun Start

12:00-1:00 PM

Registration for Afternoon Tee-Off

1:00 PM

Tee-Off/Shotgun Start

5:30 PM – 6:30 PM

Cocktails

6:30 PM

Buffet Dinner

CONTACT PERSON: _____

BUSINESS/ORGANIZATION: _____

ADDRESS: _____

PHONE: _____ FAX: _____

E-MAIL: _____

- Un-sponsored team _____
- Sponsored team(s) _____ \$420.00 per team-American Funds

****Team Sponsorship includes: Tournament fees, Greens Fees, Cart Fees, Registration Gift, Lunch and Dinner**

- I want to sponsor a team, please find me golfers.
- Will sponsor _____ Standard Tee/Green Sign(18x16) at \$175 each or (2) for \$300.00
- Will sponsor _____ Plus Size Tee/Green Sign(18x32) at \$200 each or (2) for \$350.00
- Will Share one Standard Tee Sign with another business for \$100.00
- I Would like other sponsorship options. Please contact me.
- Will send donation, as I am unable to play or sponsor \$ _____
- Will only attend the Buffet Dinner at 6:30p.m _____ person(s) at \$25/person

MAKE CHECKS PAYABLE TO: MH Foundation, 1 Hospital Dr., Massena, NY 13662

Preferred Tee-Time 8am 1pm

