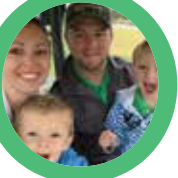


GOLF FOR THE *cure*



CHARITY GOLF TOURNAMENT *in memory of* **CHRIS ELY**

JUNE 5

All proceeds will benefit brain cancer research
and hope to find a cure with **Brain Tumor Alliance**.

As well as, a \$1000 scholarship to a Fulton Raiders Wrestler
The Christopher M. Ely Memorial Scholarship
"Reaching Higher"

BATTLE ISLAND GOLF COURSE
2150 NY-ROUTE 48 | FULTON | NY | 13069

9AM START • CAPTAIN & CREW



TEAMS

teams of four

\$260

INDIVIDUALS

don't have a team,
we'll find one for you

\$70

BBQ LUNCH

for non-golfers

\$20

REGISTER AT
TBA

SPONSORS A HOLE / INDIVIDUAL \$50 / CORPORATE \$100

CONTACT | SQUELYSANGELS@GMAIL.COM



GOLF FOR THE *cure*

CHARITY GOLF TOURNAMENT *in memory of* **CHRIS ELY**

REGISTRATION FORM					
LAST NAME			FIRST		
STREET ADDRESS			APARTMENT #		
CITY			STATE		ZIP
PHONE			EMAIL ADDRESS		
GENDER	MALE <input type="checkbox"/>	FEMALE <input type="checkbox"/>	ARE YOU A BRAIN CANCER SURVIVOR? <input type="checkbox"/> YES <input type="checkbox"/> NO		
TSHIRT	ADULT SMALL <input type="checkbox"/> ADULT MEDIUM <input type="checkbox"/> ADULT LARGE <input type="checkbox"/> ADULT XL <input type="checkbox"/> ADULT 2XL <input type="checkbox"/> ADULT 3XL <input type="checkbox"/>				
TEAM NAME					
REGISTRATION FEES: TEAMS OF FOUR: \$260 INDIVIDUALS (don't have a team, we'll find one for you): \$70 BBQ LUNCH (can't play, join us for lunch): \$20 VIRTUAL PARTICIPANT: \$50 SPONSOR A HOLE: \$50 INDIVIDUAL / CORPORATE \$100					
	CASH	CHECK	CREDIT		
REGISTRATION AMOUNT	\$ _____	\$ _____	CHECK # _____	\$ _____	
DONATION AMOUNT	\$ _____	\$ _____	CHECK # _____	\$ _____	
TOTAL	\$ _____	\$ _____	CHECK # _____	\$ _____	
CREDIT CARD: VISA <input type="checkbox"/> MASTER CARD <input type="checkbox"/> AMEX <input type="checkbox"/> DISCOVER <input type="checkbox"/>					
CARD NUMBER _____			EXPIRATION _____		
CARD HOLDER SIGNATURE _____					
DONATIONS SHOULD BE MADE PAYABLE TO: (put team name on check memo line) BRAIN TUMOR ALLIANCE PO Box 7607 St. Petersburg, FL 33704					
SIGNATURE _____			DATE _____		

Brain Tumor Alliance is a 501(c)(3) nonprofit, tax-exempt organization designated by the Internal Revenue Code.
 Our tax identification number is 26-3429074.
www.BrainTumorAlliance.org - Info@BrainTumorAlliance.org - 727-781-HOPE(4673) FAX: 727-781-6425

CONTACT | SQUELYSANGELS@GMAIL.COM

