



7th Annual Martin, Staniloff & Thal Charity Golf Classic

D'Arcy Ranch Golf Club — **Thursday, August 18th 2022**

Golfer Registration

Entry Deadline: Thursday August 11, 2021

Schedule	
<i>Thursday, August 18th 2022</i>	
11:00am – 12:00pm	Registration and Lunch
12:00pm – 12:30pm	Clinic with Lisa “Longball”
12:40pm	Players head out in carts
1:00pm	Shotgun Start
6:00pm	Dinner, Awards and Live Auction <i>MC: Lisa “Longball”</i>

Packages

**Includes green fees, cart, lunch, dinner, tee gift, and awards*

<u>Golf Foursome</u>	\$1000	<input style="width: 50px;" type="text" value="\$"/>
<u>Golf Twosome</u>	\$500	<input style="width: 50px;" type="text" value="\$"/>
<u>Single Golfer</u>	\$250	<input style="width: 50px;" type="text" value="\$"/>
<u>Dinner Guest Only</u>	\$50	<input style="width: 50px;" type="text" value="\$"/>
<u>I/We would like to add a donation</u>		<input style="width: 50px;" type="text" value="\$"/>
Total		<input style="width: 50px;" type="text" value="\$"/>

Golfer Information

Please fill out the following. If you are paying individually but are part of a team, please indicate the names of your teammates below.

I am part of a team

I am a single golfer

Golfer One

Name: Company:

Address:

Phone: Email:

Kosher Meal Requested

I grant JFSC permission to use photos taken of me at the Golf tournament for promoting, publicizing, or highlighting JFSC and its activities.

Golfer Two

Name: Company:

Address:

Phone: Email:

Kosher Meal Requested

I grant JFSC permission to use photos taken of me at the Golf tournament for promoting, publicizing, or highlighting JFSC and its activities.

Golfer Three

Name: Company:

Address:

Phone: Email:

Kosher Meal
Requested

I grant JFSC permission to use photos taken of me at the Golf tournament for promoting, publicizing, or highlighting JFSC and its activities.

Golfer Four

Name: Company:

Address:

Phone: Email:

Kosher Meal
Requested

I grant JFSC permission to use photos taken of me at the Golf tournament for promoting, publicizing, or highlighting JFSC and its activities.

Additional Information (optional)

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Payment Information

Name: Company:

Billing Address:

City: Postal Code:

Phone: Email:

Credit Card Number: Expiry Date: /

Name on Card:

**If paying by cheque, please make payable to JFSC*

Please fill out this form and email to petag@jfsc.org.
For more information email Peta or call [403-692-6389](tel:403-692-6389)

420 – 5920 1A Street SW Calgary, AB T2H 0G3

Tournament proceeds support JFSC programs and services.

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