

EARLY BIRD REGISTRATION- REGISTER BY MAY 15th AND RECEIVE A PERSONALIZED GIFT AND A FREE ROUND OF FOOT GOLF AT CROWN ISLE RESORT



St. Joseph's Hospital Charity Golf Classic
June 16th, 2016
 Please register us for this year's Fun Event
 (We will combine to form foursomes when required)



<p>Player #1</p> <p>Dinner & Golf (includes range balls and power cart).</p> <p>Name: _____</p> <p>Mailing Address: _____</p> <p>_____ (postal code)</p> <p>Telephone: _____</p> <p>Dinner Only (\$50.00 per person) Number of Extra Dinners _____ Name(s): _____</p> <p align="center">Method of Payment: (\$175.00 per golfer; \$50.00 dinner only)</p> <p><input type="checkbox"/> Please charge my Visa/MC/AMEX for \$ _____</p> <p>No. _____</p> <p>Exp. Date: _____</p> <p>Card Name: _____</p>	<p>Player #2</p> <p>Dinner & Golf (includes range balls and power cart).</p> <p>Name: _____</p> <p>Mailing Address: _____</p> <p>_____ (postal code)</p> <p>Telephone: _____</p> <p>Dinner Only (\$50.00 per person) Number of Extra Dinners _____ Name(s): _____</p> <p align="center">Method of Payment: (\$175.00 per golfer; \$50.00 dinner only)</p> <p><input type="checkbox"/> Please charge my Visa/MC/AMEX for \$ _____</p> <p>No. _____</p> <p>Exp. Date: _____</p> <p>Card Name: _____</p>
<p>Player #3</p> <p>Dinner & Golf (includes range balls and power cart).</p> <p>Name: _____</p> <p>Mailing Address: _____</p> <p>_____ (postal code)</p> <p>Telephone: _____</p> <p>Dinner Only (\$50.00 per person) Number of Extra Dinners _____ Name(s): _____</p> <p align="center">Method of Payment: (\$175.00 per golfer; \$50.00 dinner only)</p> <p><input type="checkbox"/> Please charge my Visa/MC/AMEX for \$ _____</p> <p>No. _____</p> <p>Exp. Date: _____</p> <p>Card Name: _____</p>	<p>Player #4</p> <p>Dinner & Golf (includes range balls and power cart).</p> <p>Name: _____</p> <p>Mailing Address: _____</p> <p>_____ (postal code)</p> <p>Telephone: _____</p> <p>Dinner Only (\$50.00 per person) Number of Extra Dinners _____ Name(s): _____</p> <p align="center">Method of Payment: (\$175.00 per golfer; \$50.00 dinner only)</p> <p><input type="checkbox"/> Please charge my Visa/MC/AMEX for \$ _____</p> <p>No. _____</p> <p>Exp. Date: _____</p> <p>Card Name: _____</p>

Return Registration and Payment to:
Crown Isle Pro Shop 399 Clubhouse Drive or Fax with Payment instruction (250)703-5051 Attention: Rod
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