

LORILLARD FEDERAL CREDIT UNION

20TH ANNUAL CHARITY GOLF TOURNAMENT ENTRY FORM

TO BENEFIT THE ROYSTER M. TUCKER JR., MEMORIAL SCHOLARSHIP FUND AND DUKE CHILDRENS'S HOSPITAL.

DATE: THURSDAY, APRIL 12, 2012

LOCATION: WILLOW CREEK GOLF COURSE AT THE HIGH POINT COUNTRY CLUB
916 ABBOTTS CREEK CHURCH RD., HIGH POINT, NC
Phone Number: 336-869-2416

TIME: IT'S A DOUBLE-SHOTGUN START
PLAY ONE ROUND OR TWO! GO FOR THE IRONMAN AND PLAY BOTH!
8:45 AM SHOTGUN START AND 1:30PM SHOTGUN START

ENTRY FEE: **\$65 PER PLAYER/\$250 TEAM ENTRY**
PLEASE SIGN UP YOUR OWN TEAM. EXTRA PLAYERS WILL BE ASSIGNED A TEAM
ENTRY FEE INCLUDES GREEN FEES, CART, COMPLIMENTARY GIFT BAG & LUNCH!

FORMAT:

FOUR PERSON "CAPTAIN'S CHOICE"

CANCELLATION POLICY:

- IF THE TOURNAMENT IS CANCELLED DUE TO WEATHER OR OTHER EVENTS, YOU WILL RECEIVE A FULL REFUND.
- IF PLAYER CANCELS, 48-HOUR NOTICE IS REQUIRED TO RECEIVE 50% OF ENTRY FEE.
- IF PLAYER IS A "NO-SHOW," ENTRY FEE IS NON-REFUNDABLE.

ENTRY FORM

DEADLINE FOR ENTRIES: APRIL 9, 2012

PLEASE PRINT, INDICATE WHICH TEE TIME OR CHECK BOTH FOR BOTH ROUNDS, AND CHECK THE CHARITY YOU PREFER TO SUPPORT.

Please sign up everyone on your team. Players not signed with a team will be assigned one.		Shotgun Start (Check one or both) Lunch provided to all golfers 12:00 -2:00		Charity you wish to support (Please check one)	
Name	Phone Number	8:45 a.m. Registration 7:30 - 8:30	1:30 p.m. Registration 11:00 - 12:00	Duke	Scholarship Fund
1.					
2.					
3.					
4.					

By completing this application, I hereby release LFCU, Willow Creek Golf Course, and any other responsible parties from any liabilities due to accidents or injuries to participants.

SPONSOR FORM

SPONSORS WILL RECEIVE RECOGNITION IN ALL PUBLICATIONS, HOLE SIGNAGE REPRESENTATION AND BROCHURES. ALL DONATIONS ARE TAX DEDUCTIBLE, TIMELY RECEIPTS WILL BE PROVIDED. PLEASE CHECK LEVEL OF SPONSORSHIP AND LIST SPONSOR'S NAME OR COMPANY.

Gold \$750	Silver \$500	Bronze \$300	Hole \$100	Lunch/Beverage \$150	Other Amount	Gifts for Goody Bag

COMPANY NAME AND CONTACT (PLEASE LIST SPONSOR'S NAME EXACTLY HOW YOU WANT IT TO APPEAR ON THE SIGNAGE)

TOTAL AMOUNT ENCLOSED: \$ _____

FULL PAYMENT IS EXPECTED WITH ENTRY FORM UNLESS OTHER ARRANGEMENTS HAVE BEEN MADE.

PLEASE MAKE CHECK PAYABLE TO LFCU AND MAIL TO 2917 SOUTH ELM-EUGENE ST., GREENSBORO, NC 27406, ATTENTION PATTI WEBER. YOU MAY ALSO RETURN YOUR PAYMENT AND ENTRY FORM TO THE HIGH PT. BRANCH OR THE PLANT BRANCH.