



OLD COLONY HOSPICE GOLF CLASSIC VIII
PLAYER RESERVATION FORM

Monday, July 26, 2010 ~ Thorny Lea Golf Club, Brockton

Please complete all requested information. Individual players will be placed in foursomes.

Cost: Early registration by June 1: \$275 per player; \$295 after June 1 – includes golf fees, cart, brunch, dinner, golf apparel, goodie bag & other amenities.

CHOOSE GROUP FORMAT: ___ Best Ball (please include handicaps) ___ Scramble

Player First/Last Name: _____

Address: _____

City/State/Zip: _____

Phone: _____ E-mail: _____

Shirt Size: ___ Male or ___ Female : S M L XL XXL

Handicap: (for Best Ball) _____

Player First/Last Name: _____

Address: _____

City/State/Zip: _____

Phone: _____ E-mail: _____

Shirt Size: ___ Male or ___ Female : S M L XL XXL

Handicap: (for Best Ball) _____

Player First/Last Name: _____

Address: _____

City/State/Zip: _____

Phone: _____ E-mail: _____

Shirt Size: ___ Male or ___ Female : S M L XL XXL

Handicap: (for Best Ball) _____

Player First/Last Name: _____

Address: _____

City/State/Zip: _____

Phone: _____ E-mail: _____

Shirt Size: ___ Male or ___ Female : S M L XL XXL

Handicap: (for Best Ball) _____

Payment Information:

Please send completed form with a check payable to “Old Colony Hospice” in order to secure your reservation for the tournament and to receive the early registration discount. If you prefer to pay by credit card – please complete the info below and fax it to us at 781-297-7345 or you can call us at 781-341-4147 x 204.

Card Type: (circle one) Mastercard Visa Discover

Card Number: _____ Expiration Date: _____

Name on Card: _____