



CASA

# 1st Annual Charity Golf Tournament

## Four Person Scramble Individual Golfer & Team Registration

Name: \_\_\_\_\_

Company: \_\_\_\_\_

Phone Number: \_\_\_\_\_

E-Mail: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

Player(s) Name(s)

1. \_\_\_\_\_

2. \_\_\_\_\_

3. \_\_\_\_\_

4. \_\_\_\_\_

Registration forms must be received by Sept. 15, 2010. Payment of cash or check will be due at time of check-in on Sept. 18, 2010, at 8:00 am.

\$65 per player

Checks can be made payable to: Great Basin CASA

Any questions please call Shannan Cessford at 775-342-3861

