Central Northeast Health Foundation 22nd Annual "Golf for Health" July 7, 2022 Registration Form

Please select the appropriate box below:

- □ I would like to support the Tournament as a Corporate Sponsor (\$2,500)
- □ I would like to sponsor a team of four individuals (\$1,000) \$900 prior to Early Bird Deadline of June 3rd
- □ I would like to support the Night Before Wing Night (July 7, 2021) as a Corporate Sponsor (\$1,500)
- □ I would like to support the Tournament by sponsoring a hole or tee during the event (\$250)
- I cannot participate this year, however, please accept my donation of: \$ _____

Please print clearly

Organization Name:			
Contact Person:			
Mailing Address:			
City / Town & Postal Code:			
Phone:	Cell:	Fax:	
E-mail:			
 Tournament & Luncheon (if Covid Restrictions allow)- Registration \$1,000 per team of four (Early Bird of \$900 prior to June 4th) Awards Luncheon Only - \$50.00 per additional person 			
Please make cheque payable to the Central Northeast Health Foundation			
 Please invoice the address above, all payments will be forwarded. I am aware that my team space is not guaranteed until registration fee has been received. 			
□ My cheque / money order is end	closed, or		
Payment by: Visa	Mastercard		
Card Number:	Expiration D	Date C.V.V	
Authorized Signature:			
If entering a team, please list part	ticipant names:		
1	2		
3	4		
Please note that BBQ steak will b		ts unless we are notified of alternat	te selectio

Completed forms and payment must be received to reserve your space.

Please send completed form and payment to:

Central Northeast Health Foundation PO Box 222 Gander NL A1V 1W6

Phone: 709- 256-5742Fax: 709-256-4350Email: foundation@centralhealth.nl.caFacebook: www.facebook.com/cnehfTwitter: @CNEHF1Instagram: @cne.hf

For more information, please visit our website at www.cnehf.nl.ca