

The Annual PMCQ Golf Tournament

MONDAY, JUNE 13th, 2011 • Golf St-Raphaël

Brunch	9:30
Tee-off (Shotgun)	11:00
Cocktail	17:00
Dinner	18:00

Book before Friday, May 27th to reserve!
 Register before May 3th to qualify for the *Early Bird Rate!*

PLEASE READ THE FOLLOWING INSTRUCTIONS CAREFULLY:

- Deadline for registration: **Friday, May 27th**.
- FAX BACK your completed registration form to: **(514) 486-3688**.
- Complete all sections of this form, except the area below the dotted line. Incomplete or inadequately completed forms will be returned.
- Mail your payment (cheque or credit card number) to the address below, enclosing a copy of your completed registration form. Forms received without payment will be returned. For more information, call **(514) 486-3458**.
- On June 6**, you will receive a confirmation of your registration, plus driving directions, by fax. In the case of foursomes, the confirmation will be faxed only to the foursome leader.
- A receipt will be mailed to you after the tournament.
- Only payments made by cheque, Amex, Visa or MasterCard will be accepted.
- Please note the following **deadline** and conditions: **registration, changes to registration, cancellation and reimbursement: May 27th**. After this date, we cannot guarantee you a spot. Also, no changes will be accepted and you will be charged the full amount for each cancellation.
- PMCQ members will be given priority in selection of golf course.

DESIGNATED FOURSOME LEADER

Name _____	Handicap (approx.) _____	Company _____
Address _____	Telephone _____	Fax _____
City _____	Postal Code _____	E-mail _____

FOURSOME OF PLAYERS

Please print and check (✓) appropriate boxes.

NAME	COMPANY	MEMBER	NON-MEMBER	GOLF & DINNER	DINNER ONLY
1. _____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. _____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. _____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. _____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

COURSE & GAME PREFERENCE

INDICATE 1st & 2nd CHOICE: 1st CHOICE* 2nd CHOICE

Course #1: Best Ball _____

Course #2: Stroke Play _____

*We will try to accommodate your first choice.

Register before May 3 to qualify for the *Early Bird Rate!*

FEES

(GST #: 101019735; QST #: 1002033794)

	GOLF & DINNER <small>(EARLY BIRD)</small>	DINNER ONLY <small>(EARLY BIRD)</small>		
Members	\$210 (\$195)	\$115 (\$100)	Subtotal	\$
Non-members	\$310 (\$295)	\$150 (\$135)	+ GST (5%)	\$
			+ QST (8.5%)	\$
			Total	\$

Payment by: CHEQUE AMEX VISA MASTERCARD

Card Number: _____ Expiration Date: _____

Name as it appears on card: _____ Signature: _____

Note: Forms not prepaid by cheque or credit card will be returned.

Please make cheque payable to **PMCQ Tournament** and mail to:
Data Ad, PMCQ Golf Tournament, 2165 Madison, Montreal, QC H4B 2T2

For internal use. Please do not write below dotted line.

Confirmed by: _____ Date: _____

Payment received: Yes No

