

# The Annual PMCO Golf Tournament

## TUESDAY, JUNE 8<sup>th</sup>, 2010 • Golf St-Raphaël

**So close you'll barely  
have time to change!**

**Book before Friday, May 28<sup>th</sup> to reserve!**

**PLEASE READ  
THE FOLLOWING  
INSTRUCTIONS CAREFULLY:**

1. Deadline for registration: **Friday, May 28<sup>th</sup>**.
2. FAX BACK your completed registration form to: **(514) 486-3688**.
3. Complete all sections of this form, except the area below the dotted line. Incomplete or inadequately completed forms will be returned.
4. 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**.
5. **On June 3, 2010**, 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.
6. A receipt will be mailed to you after the tournament.
7. Only payments made by cheque, Amex, Visa or MasterCard will be accepted.
8. Please note the following **deadline** and conditions: **registration, changes to registration, cancellation and reimbursement: May 28<sup>th</sup>, 2010**. 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.
9. PMCO members will be given priority in selection of golf course.

**DESIGNATED FOURSOME LEADER**

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

**NAMES OF FOURSOME PLAYERS**  
*Please print and check (✓) appropriate boxes.*

	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 _____	<input type="checkbox"/>	<input type="checkbox"/>
Course #2: Stroke Play _____	<input type="checkbox"/>	<input type="checkbox"/>

\*We will try to accommodate your first choice.

### FEES

(GST #: 101019735; QST #: 1002033794)

	GOLF & DINNER	DINNER ONLY		
Members	\$210	\$115	Subtotal	\$
Non-members	\$310	\$150	+ GST (5%)	\$
			+ QST (7.5%)	\$
			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 **PMCO Tournament** and mail to:  
**Data Ad, PMCO 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

