

**Registration Information for *Friends* of CCMA Golf Tournament
Friday Afternoon, July 17, 2009 - The Club at Yarmouthport**

-Format-

Scramble, shotgun start.
Teams of 4 will be arranged for individual players.
Handicaps are not required.

-Drawings for Donated Gifts and Prizes-

Drawings will occur near the end of the barbecue.

-Prizes-

Team awards
Closest to pin for women and men
Longest drive for women and men

First hole in one: \$10,000

-Registration-

The deadline for registration is July 1, 2009. Earlier sign-ups are encouraged.

Registration is not guaranteed until payment is received. All fees are non-refundable.
The entry fee, which includes greens fee, golf cart, goodie bag and barbecue, is \$125 per player or \$500 per foursome.

Tournament limited to 72 players

Contacts & Questions: Bill McCarthy, Tel. (508)362-0119 or Lee Adams, Tel. (508)385-7082

Net proceeds will benefit the Cape Cod Museum of Art exhibitions, art programs, art education classes, community activities and operations. Tax deduction/thank you letters will be sent to all golf participants.

Not a golfer? Join us for the social period and barbecue. Tickets are \$30.00 per person.

Check the appropriate selection: Please arrange a foursome Playing with me will be:

Please register the following golfer(s) for the *Friends* of CCMA Golf Tournament at \$125 per person (please print clearly):

Name: _____
Company: _____
Address: _____
City, State, Zip: _____
Day Time Phone: _____
Email address: _____

Personal/Company Tee or Green Signs \$100 each

In Honor In Memory

Of: (Name for Sign) _____

Name: _____
Company: _____
Address: _____
City, State, Zip: _____

Name: _____
Company: _____
Address: _____
City, State, Zip: _____

Name: _____
Company: _____
Address: _____
City, State, Zip: _____

I am interested in other sponsorships. Please contact me.

| | No. | Amount |
|------------------------|--------------------------------|-------------------------|
| Participation – Single | \$125 <input type="checkbox"/> | \$ <input type="text"/> |
| Participation – Team | \$500 <input type="checkbox"/> | \$ <input type="text"/> |
| Guest(s) at Barbecue | \$ 30 <input type="checkbox"/> | \$ <input type="text"/> |

I regret that I'm unable to be a sponsor of this event. However, enclosed is a donation in the amount of \$_____. (Donations are 100% tax deductible. To meet our printing deadlines, please make your donation payable to Cape Cod Museum of Art and return as soon as possible.)

Name: _____
Address: _____
Email: _____

Company: _____
City: _____ State: _____ Zip: _____
Phone: _____

Mail/drop off completed form with payment to/at:

Friends of CCMA Golf Tournament
Cape Cod Museum of Art
P.O. Box 2034
(60 Hope Lane)
Dennis, MA 02638

Total Amount Enclosed: \$ _____
Checks payable to Cape Cod Museum of Art
 MasterCard Visa Ver. Code _____
Name on Card: _____
Card # _____
Exp. Date ___/___/___
Signature: _____