



U H L E T T E R W I N N E R S C L U B

GOLF TOURNAMENT

FRIDAY, SEPTEMBER 18, 2009 ▶ 8:00 AM
SUNRISE VISTA GOLF COURSE, NELLIS AIR FORCE BASE, NEVADA

REGISTRATION

Contact name*: _____

Daytime phone number: _____

Hole sponsor and/or team name: _____

** Contact will be responsible for distributing information to all participants listed below.*

*Full names of all golfers must be submitted on this form. Please be prepared to present a photo ID at the Nellis Air Force Base security check point.
For more information, call the LWC Office at (808) 956-6523 or e-mail: uhletwin@hawaii.edu.*

GOLFER INFORMATION

Golfer #1 _____

E-mail _____

Business phone _____ *Handicap ____ Age ____

Please check appropriate box(es)

UH Letterwinner Member UH Alumni Association Member

Golfer #2 _____

E-mail _____

Business phone _____ *Handicap ____ Age ____

Please check appropriate box(es)

UH Letterwinner Member UH Alumni Association Member

Golfer #3 _____

E-mail _____

Business phone _____ *Handicap ____ Age ____

Please check appropriate box(es)

UH Letterwinner Member UH Alumni Association Member

GOLF SHIRT FORM

SIZE	QUANTITY
WOMEN'S SIZES	
Small	
Medium	
Large	
X-Large	
MEN'S SIZES	
Small	
Medium	
Large	
Extra Large	
XX-Large	
TOTAL	

Hole Sponsorship

Platinum Title Sponsor, 3 Teams: \$5,000 Gold Hole Sponsor, 2 Teams: \$3,500 Silver Tee Sponsor, 1 Team: \$1,000

Tournament Fees

\$200 per golfer or \$600 per team of 3 includes green and cart fees, bus transportation to and from the California Hotel & Casino, goodie bag, green "Under Armour" polo shirt with "H" logo embroidered on front, closest-to-the-pin, continental breakfast, bento lunch, awards and PRIZES!

Format & Prizes

- ▶▶ Three person scramble with awards to the top three teams
- ▶▶ Door prizes
- ▶▶ Closest-to-the-pin on all par 3's, Par 3 challenges, and hole-in-one contests

Payment Options

- Enclosed is my check, payable to UH Foundation in the amount of \$_____
- Please charge my credit card in the amount of \$_____
- Visa MasterCard American Express Exp. date: _____

Card number: _____

Name (as it appears on card): _____

Authorized signature: _____

Sign-up Deadline: August 1, 2009

Please fax this form to: (808) 956-4637

or mail to: UH Letterwinners Club

1337 Lower Campus Rd

Honolulu, Hawaii 96822

Please make checks payable to: UH Foundation-LWC

** Please use current handicap, lowest handicap if you belong to more than one club. Maximum handicap is 24 for men and 30 for women. Committee reserves right to make handicap adjustments.*