

Montfort Hospital Foundation's

# 16<sup>th</sup> Annual Golf Tournament

Friday, August, 27 2010  
Outaouais Golf Club  
301 Montée Outaouais, Rockland, ON

Breakfast from 6:30 a.m. to 8:00 a.m.  
Best Ball - Simultaneous Tee-Off at 8:30 a.m.  
Buffet & Reception at 2:00 p.m.



## FOURSOME

Name: \_\_\_\_\_

Business: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_

Province: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Telephone: \_\_\_\_\_

Fax: \_\_\_\_\_

Email: \_\_\_\_\_

Number of participants (tournament and dinner)  
\_\_\_\_\_ X \$215 = \_\_\_\_\_ \$

Number of guests (dinner only)  
\_\_\_\_\_ X \$50 = \_\_\_\_\_ \$

Foursome:

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_
4. \_\_\_\_\_

Please assign me a foursome.

I agree to receive information about activities organized by the Montfort Hospital Foundation.

## SPONSORSHIP OPPORTUNITIES

- Official (\$10,000)
- Privileged (\$5,000)
- Major (\$2,500)
- Principal (\$1,000)
- Friend (\$500)
- Golf Hole (\$200)
- Souvenir gifts for the participants (\$3,000)
- Wine Sponsor (\$1,500)
- Breakfast Sponsor (\$1,500)
- Gifts for the reception and/or auctions, please specify \_\_\_\_\_
- Donation to the Montfort Hospital Foundation \_\_\_\_\_ \$ (An income tax receipt will be issued)

**Reservations must be accompanied by a cheque or a credit card number.**

Method of payment:

- Cash
- Cheque (Payable to the Montfort Hospital Foundation)
- Credit Card
- Visa
- MasterCard
- Amex

Total amount: \_\_\_\_\_ \$

Card Number: \_\_\_\_\_

Expiration Date: \_\_\_\_\_

Card Holder: \_\_\_\_\_

Signature : \_\_\_\_\_

Please return this registration form by fax at 613-7-4928 or forward your payment to:

Montfort Hospital Foundation  
713 Montreal Road  
Ottawa, Ontario K1K 0T2  
[www.montfortfoundation.ca](http://www.montfortfoundation.ca)

For additional information, please contact Julie Briand 613-746-4621, ext. 2009 or [jbriand@montfort.on.ca](mailto:jbriand@montfort.on.ca)