

**run, jane, run**

Morris Park County Club

South Bend, IN

Monday, August 24, 2009

Register online at [www.ywcasic.org](http://www.ywcasic.org)

or mail this form to 1102 S. Fellows Street, South Bend, IN 46601

**Entry Fee: \$85per person /\$340 per team**

**Championship A and B Flights:**

7:30 am Registration

8:00 am Shotgun Start

12:30 Lunch and presentation of prizes

**CDE Flights**

1:00 Registration

1:30 Shotgun Start

6:00 Dinner and presentation of prizes

**Team Captain/Contact Person:** \_\_\_\_\_ Handicap \_\_\_\_\_

Street Address \_\_\_\_\_ City/State/Zip \_\_\_\_\_

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

Charge \$ \_\_\_\_\_  Visa  MasterCard Account # \_\_\_\_\_ Exp: \_\_\_\_\_

Print Name as on Card \_\_\_\_\_

**Second Golfer's Name:** \_\_\_\_\_ Handicap: \_\_\_\_\_

Street Address \_\_\_\_\_ City/State/Zip \_\_\_\_\_

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

Charge \$ \_\_\_\_\_  Visa  Mastercard Account # \_\_\_\_\_ Exp: \_\_\_\_\_

Print Name as on Card \_\_\_\_\_

**3<sup>rd</sup> Golfer's Name** \_\_\_\_\_ Handicap: \_\_\_\_\_

Street Address \_\_\_\_\_ City/State/Zip \_\_\_\_\_

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

Charge \$ \_\_\_\_\_  Visa  Mastercard Account # \_\_\_\_\_ Exp: \_\_\_\_\_

Print Name as on Card \_\_\_\_\_

**4<sup>th</sup> Golfer's Name** \_\_\_\_\_ Handicap: \_\_\_\_\_

Street Address \_\_\_\_\_ City/State/Zip \_\_\_\_\_

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

Charge \$ \_\_\_\_\_  Visa  MasterCard Account # \_\_\_\_\_ Exp: \_\_\_\_\_

Print Name as on Card \_\_\_\_\_