



The 11th Anniversary
2010 Charity Golf TOURNAMENT
Cheval Golf & Country Club

SCRAMBLE

www.HCCSchiro.org

This year's charity beneficiary

Helping
Injured or
Wounded
Active
Duty Military
Heroes
and Their
Families.



Today's Date: _____

TEAM Coordinator: _____ (Checks must be submitted together for team discount.)

Player: \$150 • TEAM: \$500 • Premiere Team W/Hole Sign: \$750

Text to include on hole sign: _____

First Name: _____ Last Name: _____

Company Name: _____

Address: _____

Suite: _____

City: _____ State: _____ Zip: _____

Tel: _____

Please make checks payable to
HCCS!

Fax: _____

eMail: _____

My Team Members: *(First & Last Names)* _____

HCCS
Hillsborough County Chiropractic Society Presents...

Fabulous Contests & Prizes!
Entry Fee includes:
Green fees, driving range, cart,
boxed lunch & post-event barbeque

SAVE \$50!!!
Register your team before Sept. 1!

Visa • Mastercard • Discover Accepted
Call for credit card form.



Registration Fees

- Individual Player: \$150
- Team: (4 players) \$500
- Premiere Team Sponsor:
* \$750 includes Hole Sign

Note: Hole signs will be available event day for sponsors to take with them.

HCCS Golf Tournament Registration Address

5100 35th Ave. North • St. Petersburg, FL 33710 • FAX: 727-231-8143

Please Call Michelle Nault For More Info: (813) 453-0874 or Email: nault.michelle@gmail.com

Revised: 08/10/10

Time: Registration begins at 10:30 AM / Tee-off: 1 pm/ Banquet following tournament.

Saturday, October 9, 2010 @ Cheval Golf & Country Club

Registration Form
Player