



**5<sup>th</sup> Annual**  
**Martin, Staniloff & Thal**  
*Charity Golf Classic*

**August 22, 2019**

**GOLFER REGISTRATION & DINNER TICKETS**

Select your golf package or dinner only option. If golfing, please complete details for each golfer in your party.

Foursome \$900\*    Twosome \$450\*    Single \$250\*    Dinner Only \$50 x \_\_\_ tickets

\* Includes green fees, cart, lunch, tee gift, dinner and prize entries

**GOLFER #1**

Name: \_\_\_\_\_ Company: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_ Postal Code: \_\_\_\_\_ Phone: \_\_\_\_\_  
Email: \_\_\_\_\_ Handicap: \_\_\_\_\_ Kosher Meal Requested: Y / N

**GOLFER #2**

Name: \_\_\_\_\_ Company: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_ Postal Code: \_\_\_\_\_ Phone: \_\_\_\_\_  
Email: \_\_\_\_\_ Handicap: \_\_\_\_\_ Kosher Meal Requested: Y / N

**GOLFER #3**

Name: \_\_\_\_\_ Company: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_ Postal Code: \_\_\_\_\_ Phone: \_\_\_\_\_  
Email: \_\_\_\_\_ Handicap: \_\_\_\_\_ Kosher Meal Requested: Y / N

**GOLFER #4**

Name: \_\_\_\_\_ Company: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_ Postal Code: \_\_\_\_\_ Phone: \_\_\_\_\_  
Email: \_\_\_\_\_ Handicap: \_\_\_\_\_ Kosher Meal Requested: Y / N

**PAYMENT INFORMATION**

Credit Card Number: \_\_\_\_\_ Exp: \_\_\_\_\_

(Sorry, we cannot accept American Express cards)

Billing address: \_\_\_\_\_ City: \_\_\_\_\_ Postal Code: \_\_\_\_\_

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

(If paying by cheque, please make your cheque payable to Jewish Family Service Calgary)

**MAIL YOUR ENTRY FORM TO:**

ATTN: Lori Wolf  
Jewish Family Service Calgary  
#420 5920 – 1A Street SW Calgary, AB T2H 0G3

**FOR MORE INFORMATION:**

Phone: 403-287-3510  
Email: [golf@jfsc.org](mailto:golf@jfsc.org)  
[www.jfsc.org](http://www.jfsc.org)