

The 11th Annual Springwater SWING Golf Tournament

Monday, July 17, 2017
Springwater Golf Course
1:00 pm shotgun start

Benefiting the Community Assistance Program,
Physician Recruitment and Local Initiatives

2 Hole-in-One
Opportunities



Enjoy a day of challenging golf, great camaraderie and fantastic food, all in support of worthwhile causes.

Your registration fee includes a barbecue lunch, a round of golf with a cart and a delicious steak dinner in the clubhouse. Funds raised at this year's tournament will be directed to the Community Assistance Program, Physician Recruitment and other local initiatives.

Once you have registered (11:00 am), you will have access to the putting green and driving range prior to the shotgun start (1:00 pm).

Shop Springwater is our gift to you. Take the time to select your unique gift from one of our local vendors.

We look forward to spending time with you. Email springwaterswing@springwater.ca for more information.

Registration: \$150 per person before July 1
\$165 per person after July 1



x3

Generously sponsored by:



Worth
\$10,000



Generously sponsored by:



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Golf Tournament

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Sponsorship Opportunities

Platinum (\$5000)

Gold (\$2500)

Silver (\$1000)

Hole (\$300)

Dinner (\$4000)

Lunch (\$2000)

Let us customize a sponsorship package for you. Opportunities are available! For more information please call 705-728-4784 Ext. 2100 or email springwaterswing@springwater.ca

Registration Form

Contact Name:

Company Name:

Address:

City:

Postal Code:

Email:

Phone:

Fax:

Player 1 (\$150):

Player 2 (\$150):

Player 3 (\$150):

Player 4 (\$150):

Dinner Only (\$75):

Please make cheques payable to the Township of Springwater, or pay by debit, credit or cash at the Township Administration Centre, 2231 Nursery Road, Minesing, ON, L9X 1A8.

Registration Deadline: July 1, 2017 for the early bird rate of \$150 per golfer. After July 1, the rate increases to \$165 per golfer.

For information on sponsorship opportunities please call 705-728-4784 Ext. 2100.

Method of Payment:

Cheque Cash Visa Master Card Card #:

Card Holder Name: Expiry:

Signature: Date: