

# VILLAGE at ALUM CREEK GOLF OUTING 2010

**Date:** Saturday, August 28th 2010

**Location:** Oakhaven Golf Club

**Format:** 4 Player Team Scramble

**Cost:** Individual Adult \$65.00  
Individual Child \$60.00  
Team \$260.00

\*ENTRY FEE INCLUDES, GOLF, CART, DINNER AND AWARDS.

\*AT LEAST ONE PLAYER MUST BE A RESIDENT OF VILLAGE AT ALUM CREEK.

**Agenda:**

**12:30pm Registration**  
**2:00pm Shotgun Start**

**\*\*Scoring/Awards following golf**



PROCEEDS GO TO:

***The American Cancer Society***



**Oakhaven Golf Club**

2871 US Highway 23 North  
Delaware, Ohio 43015  
(740) 548-5636  
(888) 504-6281  
www.OAKHAVEN.com

**VAC Golf Outing Committee:**

Don Berberick 614-634-1522  
Marty Luxeder 614-286-3580

## REGISTRATION FORM

**PLAYER 1 NAME (CAPTAIN):** \_\_\_\_\_

(\*ALL INFORMATION REQUIRED FOR SINGLE PLAYER or TEAM CAPTAIN)

**ADDRESS:** \_\_\_\_\_

**CITY:** \_\_\_\_\_ **STATE:** \_\_\_\_\_ **ZIP:** \_\_\_\_\_

**PHONE:** \_\_\_\_\_ **FAX:** \_\_\_\_\_

**EMAIL:** \_\_\_\_\_

**PLAYER 2:** \_\_\_\_\_

**PLAYER 3:** \_\_\_\_\_

**PLAYER 4:** \_\_\_\_\_

**Adult Player : \$65**

Qty	Total
_____	\$ _____

**Child Player : \$60**

_____	\$ _____
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**Gold Sponsor : \$500.00**

_____	\$ _____
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**Silver Sponsor: \$250.00**

_____	\$ _____
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**Hole Sponsor: \$75.00**

_____	\$ _____
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**Flagstick Sponsor: \$50.00**

_____	\$ _____
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<b>Total:</b>	\$ _____
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**Sponsorship in Name of:** \_\_\_\_\_

**TO REGISTER FOR THIS EVENT, FAX THIS FORM TO:**

Don Berberick, Capital Golf Services at **614-448-4398**

**PAYMENT NOT REQUIRED WITH THIS FORM! PAYMENT DUE AT REGISTRATION AT GOLF COURSE THE DAY OF EVENT  
(CASH OR CHECK ONLY)**

UPON RECEIPT OF THIS FORM AN EMAIL CONFIRMATION WILL BE SENT IN REPLY CONFIRMING YOUR ENTRY/SPONSORSHIP FOR EVENT