

For further information, please contact:

Jade Monkman

Golf Tournament Coordinator

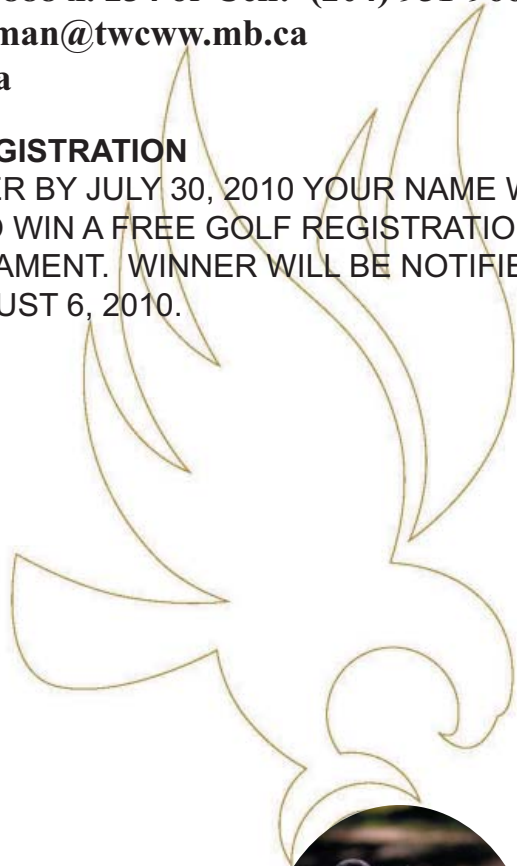
Tel: (204) 943-0888 x. 234 or Cell: (204) 951-9666

or email jmonkman@twcww.mb.ca

www.twcc.mb.ca

EARLY BIRD REGISTRATION

IF YOU REGISTER BY JULY 30, 2010 YOUR NAME WILL BE ENTERED TO WIN A FREE GOLF REGISTRATION TO OUR TOURNAMENT. WINNER WILL BE NOTIFIED BY FRIDAY, AUGUST 6, 2010.



7TH ANNUAL GOLF TOURNAMENT

TUESDAY, AUGUST 17, 2010

(rain or shine)

Larters at St. Andrews Golf & Country Club

Shot-gun Start @ 12:30 PM

Registration at 11:00 AM

\$200/PERSON, TWO-PERSON BEST BALL FORMAT

Includes registration package, green fees, golf cart, lunch & dinner banquet



ALL PROCEEDS IN SUPPORT OF THE TWCC SCHOLARSHIPS AWARDS PROGRAM

TWCC 7TH ANNUAL GOLF TOURNAMENT
 LARTERS GOLF & COUNTRY CLUB
 Tuesday, August 17, 2010

SPONSORSHIP OPPORTUNITIES AVAILABLE

DINNER SPONSOR \$5,000.00
 Four Golf Registrations (two teams), Signage on-site, Dinner announcement & presentation, acknowledgement in Newsletter & TWCC website

LUNCH SPONSOR \$2,500.00
 Golf Registration for two golfers (one team), Signage on-site, Dinner Announcement, acknowledgement in Newsletter & TWCC website

GOLF CART SPONSOR \$2,500.00
 Golf Registration for two golfers (one team), signage on each cart, Dinner Announcement, acknowledgement in Newsletter & TWCC website

PUTTING SPONSOR \$1,200.00
 Signage, Dinner Announcement, One golf registration, Acknowledgement in our Newsletter & TWCC Website

HOLE SPONSOR \$400.00
 Hole Signage, opportunity to run activity at hole, Acknowledgement in our Newsletter & TWCC website

OTHER MONETARY OR PRIZE DONATION
 Acknowledgement on-site & in Newsletter Description:

Contact Name: _____
 Company: _____
 Address: _____ Postal Code: _____
 Phone: _____ Fax: _____
 Email: _____

Register to golf!
 Please fax, mail or email to:
TWCC
 419 Notre Dame Ave.
 Winnipeg, MB R3B 1R3
 Tel: (204) 943-0888 Toll Free: 1-800-568-8488
 Fax: (204) 946-5318 Email: info@twcc.mb.ca

Contact Name: _____
 Company: _____
 Address: _____
 City, Prov, P/C
 Tel: () _____ Fax: () _____

TWO PERSON BEST-BALL FORMAT \$200.00 per person

of _____ Golfers X \$200.00 Total \$ _____
 Dinner Only: _____ X \$50.00 Total \$ _____

Golfer Participant Names

Please return completed form by email to jmonkman@twcww.mb.ca, fax to (204) 946-5318 or drop-off/mail to address below.

* Please contact Jade Monkman to arrange special requests for food allergies.

Make cheques payable to:
 TWCC Annual Golf Tournament
 419 Notre Dame Ave.
 Winnipeg, MB R3B 1R3

Payment must be received no later than August 17, 2010 at noon.

* Refunds will be issued if notification is received by 4:30 pm on August 10, 2010. No cancellations within two days of the tournament.