



# 2016 GOLFER REGISTRATION

**Register Today!**



**Where:** Silver Lake Country Club  
14700 S. 82<sup>nd</sup> Ave.  
Orland Park IL

**When:** Thursday, July 14, 2016  
Sign-in: 7:45 a.m.  
Start Time: 9:15 a.m. Shotgun Scramble

**Cost:** \$140 per player – includes green fees, cart, continental breakfast, half-way house lunch, open bar, steak dinner and prizes.  
\$75 per person – *Dinner ONLY*

**Prizes:** Longest Drive \* Betting Hole \*  
Closest to the Pin \* Hole in One  
**Trophy:** Lowest Grossing Team– Each Course

### Registrants' Names:

(Make copies if more than four)

### Check one box for each registrant:

### Type:

(Associate/ Contractor)

- |          |  |  |   |
|----------|--|--|---|
| 1. _____ | <input type="checkbox"/> Golfer- \$140 | <input type="checkbox"/> Dinner Only- \$75 | <input type="checkbox"/> A <input type="checkbox"/> C |
| 2. _____ | <input type="checkbox"/> Golfer- \$140 | <input type="checkbox"/> Dinner Only- \$75 | <input type="checkbox"/> A <input type="checkbox"/> C |
| 3. _____ | <input type="checkbox"/> Golfer- \$140 | <input type="checkbox"/> Dinner Only- \$75 | <input type="checkbox"/> A <input type="checkbox"/> C |
| 4. _____ | <input type="checkbox"/> Golfer- \$140 | <input type="checkbox"/> Dinner Only- \$75 | <input type="checkbox"/> A <input type="checkbox"/> C |

Non-cancelable after July 7<sup>th</sup>

TOTAL \$ \_\_\_\_\_

### WAYS TO REGISTER!

- **ONLINE AT:** www.CRCA.org (credit card payment required)
  - **FAXBACK:** 708-449-0837
  - **SCAN/EMAIL:** info@crca.org
  - **MAIL W/CHECK:** CRCA, 4415 W. Harrison, Suite 436, Hillside, IL 60162
- DEADLINE: JUNE 15TH OR UNTIL SOLD OUT! 300 GOLFER MAXIMUM**

### Contact Person

Name \_\_\_\_\_ Phone \_\_\_\_\_

Company \_\_\_\_\_ Email \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_ Zip \_\_\_\_\_

**Payment**     Charge Credit Card     Please Send Invoice

Card Number \_\_\_\_\_ Exp. Date \_\_\_\_\_

Name on Card \_\_\_\_\_ Signature \_\_\_\_\_

Billing Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_ Zip \_\_\_\_\_

Phone: \_\_\_\_\_ E-mail (req for or receipt) \_\_\_\_\_