

CalCPA Channel Counties Chapter 10th Annual Golf Tournament

Monday, Oct. 22, 2007

Montecito Country Club
920 Summit Road
Santa Barbara, CA 93108
(805) 969-3216



For more information or to register,
contact: Rita Williams
CalCPA Channel Counties Chapter Coordinator
(805) 571-1558 • Fax (805) 968-6844
rita.williams@calcpa.org

GOLF PACKAGES

ENTRY FEE/PER PERSON.....\$175
Includes 18 holes of golf & car, putting contest, box lunch, gift pack and buffet dinner.

EARLY BIRD SPECIAL
.....\$160/per person
Available until Sept. 1, 2007

DINNER ONLY
.....\$50/per person

TOURNAMENT SCHEDULE

10:30–11:45 a.m..... Check-in/lunch	**CONTESTS**
Noon..... Shotgun start (Scramble format)	-Putting
5:30 p.m..... BBO dinner and awards	-Longest Drive
	-Chipping

Appropriate golf attire and soft spikes are required

Golf Sponsor Packages

Event Sponsor.....\$2,500
Golf for 8 players (including box lunch & dinner); company banner and display table at event; 4 tee signs; advertisement in chapter *Bulletin* and recognition at Awards Dinner in May.

Birdie Sponsor.....\$450
Golf, lunch and dinner for 1 player; one tee sign; recognition in chapter *Bulletin* and at Awards Dinner in May.

Corporate Sponsor.....\$1,200
Golf for 4 players (including box lunch & dinner); 1 tee sign; advertisement in chapter *Bulletin* and recognition at Awards Dinner in May.

Tee/Green Sponsor.....\$300
One tee sign; recognition in chapter *Bulletin* and Awards Dinner in May.

Eagle Sponsor.....\$700
Golf for 2 players (including box lunch & dinner); recognition in chapter *Bulletin* and at Awards Dinner in May.

Raffle/Gift Bag Items
Indicate the item and value of the prizes you would like to donate

Net proceeds benefit Channel Counties Chapter Scholarship Fund.
This fund is used to provide financial assistance to dedicated students in need.

Player Registration

Please complete form in full.

(Please include e-mail if you would like to receive updates via e-mail.)

Name: _____

Firm: _____

Address: _____

Phone: _____ Handicap or Avg. Score: _____

E-mail: _____

Name: _____

Firm: _____

Address: _____

Phone: _____ Handicap or Avg. Score: _____

E-mail: _____

Name: _____

Firm: _____

Address: _____

Phone: _____ Handicap or Avg. Score: _____

E-mail: _____

Name: _____

Firm: _____

Address: _____

Phone: _____ Handicap or Avg. Score: _____

E-mail: _____

___ If you are registering more than one player, please check if you want to play together.

Return this portion

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(Return this portion)

	Qty.	Amount
Individual Player (\$1,75/player)	_____	\$ _____
Early Bird Special (\$___ /player)	_____	\$ _____
Event Sponsor (\$2,500)	_____	\$ _____
Corporate Sponsor (\$1,200)	_____	\$ _____
Eagle Sponsor (\$700)	_____	\$ _____
Birdie Sponsor (\$450)	_____	\$ _____
Tee/Green Sponsor (\$300)	_____	\$ _____
Raffle/Gift Bag Items _____	_____	\$ _____
Mulligans (\$10 each, Max. 2)	_____	\$ _____
TOTAL	_____	\$ _____

Please make checks payable to **CalCPA**

___ MasterCard ___ Visa ___ American Express

Card No.: _____ Exp. _____

Card Member Name: _____

Send completed forms by October 12, 2007 to:

Rita Williams; CalCPA; Channel Counties Chapter Coordinator;

371-B Cannon Green Drive; Goleta, CA 93117

(805) 571-1558; Fax (805) 968-6844; rita.williams@calcpa.org