ENTRY FORM

Entry Fee per player $115.00.
deadline is August 9, 2009

Enclosed is $ _____
For_____Player(s).

Please list the foursome with whom you wish to play (if not listed, you will be assigned partners) and y our index handicap or average score if you do not have an index.

Make check payable to:
Buddhist Temple of San Diego

Player's Name:	Index Handicap*
_____	_____
_____	_____
_____	_____
_____	_____

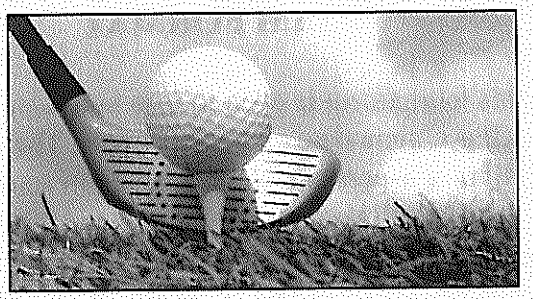
***Average score if you do not have an index.**

please return with payment to:

BUDDHIST TEMPLE OF SAN DIEGO
GOLF TOURNAMENT
2929 Market Street
San Diego, CA. 92102
Phone: (619) 239-0896

LOCATION

Eastlake Country Club
2375 Clubhouse Drive
Chula Vista, CA 91915



14th ANNUAL BUDDHIST TEMPLE of SAN DIEGO GOLF TOURNAMENT

Sunday
August 23, 2009
8:00 AM

TEAM FORMAT

This tournament is open to men and women and will accommodate all levels of play. The format will be a 4-person scramble, shotgun start. Each player will then play from selected position, placing his ball within one club length of where the selected ball lies, no nearer the hole. It is suggested that the position be marked with a tee or coin. This method of play will continue throughout the green.

Rules of play will be available at the tournament.

Proper golf attire is required.

****SOFT SPIKES****

INVITATION

14th Annual
Buddhist Temple of San Diego
Golf Tournament
4-person Scramble

●

Sunday
August 23, 2009

●

Entry Fee Per Player $115.00
Deadline August 9, 2009

7:00 - 7:30 a.m.
Check-in/Coffee & Donuts

●

8:00
Shotgun Start

●

Tournament Package
Entry Fee includes:
Green fees, golf carts, Range Balls, coffee and donuts, lunch, beverages, awards

●

ENTER EARLY!
SPACE LIMITED TO 72 PLAYERS

●

Sponsorships Available

☐ Hole in one (includes one 4-some) $1,000.00

☐ Eagle (includes 2 Players) $750.00

☐ Birdie (includes 1 Player) $625.00

☐ Beverage Carts $500.00

☐ Closest-to-the-Pin $325.00

☐ Longest Drive $250.00

☐ Hole Sponsor $125.00

☐ Gallery Sponsor
Merchandise_____
Monetary $_____

Enclosed is $_____.
Please list me as a _____
_____ Sponsor.

Company Name:
_____
(As you wish to be listed on all signage)
Contact Name:_____
Address:_____
_____
Phone No.:_____

contributions or gifts may be tax deductibke as a charitable contribution