

FALL

Baking Association
of Canada
Association canadienne
de la boulangerie

★
**ONTARIO
CHAPTER**

GOLF

★

TOURNAMENT

**Thursday
September 13 | 2018**

FORMAT - SCRAMBLE ONLY

Put your foursome together, or if you are only one or two we will arrange playing partners for you.

“GOOD GOLFING”

**Station Creek Golf Club
12657 Woodbine Avenue
Gormley, On**

**PRIZE DONATIONS
GREATLY
APPRECIATED!**

**MAXIMUM OF 144
GOLFERS - REGISTER
EARLY - DON'T BE
DISAPPOINTED!**



ONTARIO CHAPTER ANNUAL FALL GOLF TOURNAMENT

THURSDAY SEPTEMBER 13, 2018

Station Creek Golf Club - 12657 Woodbine Avenue, Gormley, On

Take Hwy 404 North to Stouffville Rd.; Go east on Stouffville Rd. to Woodbine Ave.; North on Woodbine Ave. for 2 km; Station Creek Golf Club is on the right hand (East) side.

Registration & BBQ lunch starting at 10:00 a.m. until 11:15 a.m.
Shotgun - SCRAMBLE - Start 11:30 a.m.

REGISTRATION

Contact: _____ Company: _____

Email: _____ Phone #: _____

(Please include email address as registration will be confirmed by email.)

PLAYERS - FORMAT - Scramble Only

1. _____ 2. _____

3. _____ 4. _____

ASSOCIATION MEMBERS

_____ TICKETS @ \$195 (golf, cart, lunch & dinner) Total: _____

_____ TICKETS @ \$80 (dinner only) Total: _____

NON-MEMBERS

_____ TICKETS @ \$205 (golf, cart, lunch & dinner) Total: _____

_____ TICKETS @ \$110 (dinner only) Total: _____

SPONSORSHIP

___ Gold Sponsorship - \$750 ___ Silver Sponsorship - \$500 ___ Bronze Sponsorship - \$250

(choose 1 sponsorship only)

Large Sponsor Total: _____

Please reserve _____ X \$60 Hole Sponsorship Hole Total: _____

Company Name (as it is to appear on sign) SUBTOTAL: _____

_____ BN#887064798RT HST 13%: _____

TOTAL AMOUNT ENCLOSED: _____

No refunds on tickets

DISCLAIMER - GOLFERS AND THEIR GUESTS AGREE TO INDEMNIFY AND HOLD THE BAKING ASSOCIATION OF CANADA HARMLESS FROM ANY AND ALL LIABILITY OR CLAIM FOR DAMAGES OR INJURIES WHICH MAY ARISE AS A RESULT OF PARTICIPATION IN THIS EVENT.

PAYMENT METHOD

Cheque (**Payable to Baking Association of Canada**)

VISA

Mastercard

AMEX

Charge card no. _____

expiry date (m/y) _____

Signature _____

cardholder's name _____

SUBMIT COMPLETED FORM: Email dperoff@olympicwholesale.ca • Fax 905-426-3210

EVENT CONTACT: Dan Peroff • Phone 905-426-5188

MAIL CHEQUE TO: Baking Association of Canada, 7895 Tranmere Drive, Suite 202, Mississauga ON L5S 1V9