

2nd Annual Charity Golf Classic



Prostate Cancer Foundation of Chicago

www.chicagoprostatefoundation.org

815 Pasquinelli Drive, Westmont, IL 60559

Phone: 630.654.2515 Fax: 630.654.2516

GOLFER REGISTRATION FORM

<p style="text-align: center;">Early Bird Special (on or before May 24, 2019)</p> <p><input type="checkbox"/> \$1,000 Foursome</p> <p><input type="checkbox"/> \$250 Single</p>	<p style="text-align: center;">Golfer Fees (after May 25, 2019)</p> <p><input type="checkbox"/> \$1,200 Foursome</p> <p><input type="checkbox"/> \$300 Single</p>
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Please make checks payable to **Prostate Cancer Foundation of Chicago (PCFC)**. Completed forms and payment may be mailed to Jenny Smalcuga at:

PCFC, 815 Pasquinelli Drive, Westmont, IL 60559

Or, please charge my: **Visa * Mastercard * American Express * Discover**

Name on Card: _____

Card Number: _____

Expiration Date: _____ CVV: _____

Signature: _____

Billing Address: _____ City: _____ State: _____ Zip: _____

Phone: _____

Email: _____

Questions? Please contact Jenny Smalcuga at 630-366-7861 or jsmalcuga@chicagoprostatefoundation.org

Or Pay online at www.chicagoprostatefoundation.org Events 2nd Annual Charity Golf Classic

PCFC Golf Classic	Name	Address	Phone	Email
Player 1				
Player 2				
Player 3				
Player 4				