



Comox Valley
Boys & Girls Club

Team Registration

Team Name: _____

Captain: _____

Players: _____

Contact Info:

Address: _____

Telephone: _____

Cel: _____

Fax: _____

Email: _____

Amount Paid: \$ _____

Registration Date: _____

Cart/s: yes no 1 2 3 4
(How many? @ \$50/ea) **Please circle your choices**

Extra Dinners: yes
How many? _____ @ \$15/ea



Comox Valley
Boys & Girls Club

Sponsor Registration

Name : _____

Contact person: _____

Contact Info:

Address: _____

Telephone: _____

Cel: _____

Fax: _____

Email: _____

Type of sponsorship:

Partner \$3000

Platinum \$1500

Gold \$500

Silver \$250

Hole In One

Donation Amount \$ _____

Prize: Value \$ _____

Mail **By Hand** **Pick Up**

Charitable Receipt Requested: Yes No