

REGISTRATION: 7:30 am - 9:00 am

SHOTGUN START: 9:30 am

Reception to follow

HOLE SPONSORSHIP: \$300

For directions, visit: www.kaneffgolf.com

Fax: 416-674-9541

E-mail: michelle@ibewcco.org

Cheque payable to:

IBEW CCO Organizing Fund

ECAO IBEW 14th Annual Golf Tournament Registration Form:

TEAM	TEAM PLAYERS
Company Name :	Player 1
Contact Person:	Player 2
E-mail Address:	Player 3
Phone:	Player 4
Fax:	

Yes! I would like to sponsor____ hole(s) (\$300 per hole)

Cheque payable to the "IBEW Organizing Fund" in the amount of \$ _____