

2010 Alta Bates Summit Celebrity Golf Classic
Monday, September 20, 2010, Diablo Country Club
PLAYER RESERVATION FORM

Please reserve: _____ spots in the Golf Tournament, \$400 per player. Registration - 9:00 a.m. / Shotgun Start - 10:00 a.m. / Bar B-Q Lunch / Buffet Dinner

BILLING Enclosed is a check for \$_____ guaranteeing my/our participation in the Celebrity Golf Classic.

Charge my __ Visa __ MasterCard Card # _____ Expiration Date: _____

Name _____ Company _____

Address _____ City/State/Zip _____

Telephone _____ Email _____

PLEASE NOTE: Reservations are limited and will be accepted on a first-come, first-served basis. This tournament is popular and last year player spots were SOLD OUT! It is very important to mail your PLAYER RESERVATION FORM as soon as possible....to ensure your spot. Thank you.

Myself _____ Name _____

Address _____ Address _____

Phone _____ Phone _____

Email _____ Email _____

Golf Index or Handicap* _____ Shirt Size _____ Golf Index or Handicap* _____ Shirt Size _____

Name _____ Name _____

Address _____ Address _____

Phone _____ Phone _____

Email _____ Email _____

Golf Index or Handicap* _____ Shirt Size _____ Golf Index or Handicap* _____ Shirt Size _____

* Established HDCP for July, if no handicap, please enter last three scores.

Please mail to: Alta Bates Summit Foundation, 2450 Ashby Avenue, Berkeley, CA 94705

Any questions, contact Dorine Tanaka at (510) 204-4413 or TanakaD@sutterhealth.org -- FAX number (510) 883-9303