



*Player Registration*



**Morgan Creek Golf Course**

**September 29th, 2014**

**CONTACT INFORMATION**

Company Name *(if applicable)*:

**PLAYERS:**

Player #1: \_\_\_\_\_

Player #2: \_\_\_\_\_

Player #3: \_\_\_\_\_

Player #4: \_\_\_\_\_

**CONTACT ADDRESS:**

Street Address: \_\_\_\_\_

City: \_\_\_\_\_ Province: \_\_\_\_\_

Postal Code: \_\_\_\_\_ Telephone: \_\_\_\_\_

Fax: \_\_\_\_\_ E-mail: \_\_\_\_\_

**PAYMENT:**  Cheque to CH.I.L.D. Foundation  Please Invoice



Exact Name on Card: \_\_\_\_\_

Credit Card #: \_\_\_\_\_ Expiry: \_\_\_\_\_

**Please forward registration form and payment by JUNE 30th to:**

The CH.I.L.D. Foundation  
Suite 201, 2150 Western Parkway, UBC Campus, Vancouver, B.C.V6T 1V6  
Phone: 604.736.0645 ♦ Fax: 604.228.0066 ♦ nancy@child.ca

