



16th Annual Golf Outing
June 12, 2017
St. Davids Golf Club

www.inglis.org

FOURSOME REGISTRATION

SPONSORING COMPANY / CONTACT: _____

Please enter the information for each golfer in your foursome. Please provide contact information for each golfer for the day of the Outing in case of weather-related delay or cancellation. Questions? Call (215) 581-0703.

1) **Golfer Name:** _____ **Phone:** _____

Employer: _____ **Email:** _____

Preference: ☐ **Cart** ☐ **Caddy** (Caddies are an additional cost per bag) **Handicap** (or avg. score for 18 holes): _____

2) **Golfer Name:** _____ **Phone:** _____

Employer: _____ **Email:** _____

Preference: ☐ **Cart** ☐ **Caddy** (Caddies are an additional cost per bag) **Handicap** (or avg. score for 18 holes): _____

3) **Golfer Name:** _____ **Phone:** _____

Employer: _____ **Email:** _____

Preference: ☐ **Cart** ☐ **Caddy** (Caddies are an additional cost per bag) **Handicap** (or avg. score for 18 holes): _____

4) **Golfer Name:** _____ **Phone:** _____

Employer: _____ **Email:** _____

Preference: ☐ **Cart** ☐ **Caddy** (Caddies are an additional cost per bag) **Handicap** (or avg. score for 18 holes): _____

PLEASE RETURN BY FRIDAY, MAY 12, 2017

Please complete this form and send to: Meredith Quirin Waldron, Director of Development

fax: (215) 878-0904, email: meredith.waldron@inglis.org or

2600 Belmont Avenue, Philadelphia, PA 19131