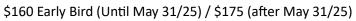




2025 Golfer Registration Form





Tea	m Name:	
Team Entry: ☐ Mens ☐	Ladies □ Mixed □ Single Entry (added on a foursome)	
Player 1: Name:	Tel:	
Email:	Address:	
Player 2: Name:	Tel:	
	Address:	
	Tel:	
Email:	Address:	
	Tel:	
Email:	Address:	
Golf Tournament – Friday,	August 15, 2025 at 1:00pm at Oaks of St. George – golf course	
Please make	cheques payable to Community Living Brant	
Total Amount Enclosed: \$ _ □ Visa □ MasterCard	□ Cheque □ Cash □ Invoice (check if you require)
Cardholder Name:		
Card No.:	Expiry Date: CCV:	
Signature:		
Tax Receipt (choose one option) = □ Company □ Team Captain □ Each golfer		

Please complete this form and return it with your payment: **By mail**: Community Living Brant – 366 Dalhousie St., Brantford, ON. N3S 3W2