



TORONTO INSURANCE WOMEN'S ASSOCIATION

REGISTRATION FORM

**24TH ANNUAL GOLF TOURNAMENT
CARDINAL GOLF CLUB**

WEDNESDAY SEPTEMBER 5, 2007

DESIGNATED CHARITY: CABBAGETOWN YOUTH CENTRE

TEE OFF: 9 AM SHARP (must be in carts by 8:45 am)

Contact Name: _____
& Phone number: _____
Company: _____

E-MAIL : _____
(CONFIRMATION WILL BE SENT BY E-MAIL)

Golfer 1 _____ @ \$170.00

Golfer 2 _____ @ \$170.00

Golfer 3 _____ @ \$170.00

Golfer 4 _____ @ \$170.00

Note: We will attempt to complete foursomes where necessary

*****THERE MUST BE A FEMALE IN YOUR FOURSOME*****

OR Dinner Only: # of dinner tickets: _____ @ \$50.00 each

Total payment enclosed: _____

**PLEASE FORWARD COMPLETED REGISTRATION FORM AND CHEQUE
(PAYABLE TO TIWA) VIA MAIL OR ICS TO:**

**ARLEIGH QUESNELLE, CHAIR, GOLF COMMITTEE
c/o K&K CANADA INC.
5800 EXPLORER DRIVE, SUITE 101
MISSISSAUGA, ON L4W 5K9**

e-mail: arleigh_quesnelle@kandkcanada.com

WE ARE UNABLE TO RESERVE SPACES WITHOUT PAYMENT