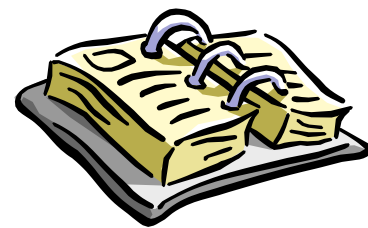


**REGISTRATION FORM**  
**HABIT NORTHERN BRAIN INJURY**  
**GOLF CLASSIC**



**WHEN**

Wednesday, June 26, 2019

**WHERE**

Sault Ste. Marie Golf Club, 1804 Queen Street E., Sault Ste. Marie ON

**REGISTRATION**

8:00 am to 8.45 am

**TEE TIME**

9:00 a.m.

(Registration includes: golf fees, cart, dinner  
Door Prizes, Silent Auction, Prizes for Teams)

**REGISTER PRIOR TO June 1st, 2019 TO SECURE A SPOT**  
**I WANT TO PAY: \$125 PER PARTICIPANT OR \$475 PER FOURSOME**

**#1** Name \_\_\_\_\_ **#2** Name \_\_\_\_\_

Address \_\_\_\_\_ Address \_\_\_\_\_

City \_\_\_\_\_ Phone \_\_\_\_\_ City \_\_\_\_\_ Phone \_\_\_\_\_

E-mail \_\_\_\_\_ E-mail \_\_\_\_\_

**#3** Name \_\_\_\_\_ **#4** Name \_\_\_\_\_

Address \_\_\_\_\_ Address \_\_\_\_\_

City \_\_\_\_\_ Phone \_\_\_\_\_ City \_\_\_\_\_ Phone \_\_\_\_\_

E-mail \_\_\_\_\_ E-mail \_\_\_\_\_

**I WILL BE A SPONSOR OF \$250 OR BE ANOTHER TYPE OF SPONSOR**

COMPANY NAME \_\_\_\_\_ Contact Person \_\_\_\_\_

ADDRESS: \_\_\_\_\_

E-mail \_\_\_\_\_ Phone \_\_\_\_\_

TYPE OF SPONSORSHIP (SEE SPONSOR SHEET FOR LEVELS OF SPONSORSHIP)

**I HAVE ENCLOSED A CHEQUE FOR \$** \_\_\_\_\_ **MADE PAYABLE TO**  
**HABIT NORTHERN GOLF CLASSIC**

**PLEASE SEND REGISTRATIONS TO ALISON ANDRESS C/O RENEW REHAB INC.**

**42 LINSTEDT STREET, SAULT STE. MARIE, ON P6B 3H9 OR EMAIL TO**  
**christiemcclure@striderehab.ca**