

St. Thomas Aquinas Catholic School

*Registration Form
8th Annual Benefit Golf Tournament
June 7, 2010
The Connecticut Golf Club, Easton, Connecticut*

Name: _____

Company: _____

Address: _____

City: _____

State: _____

Zip Code: _____

Phone Number: _____

E-mail address: _____

Names of Golfers in Foursome:	Handicap:	Rental Clubs:
_____	_____	<input type="checkbox"/> Right <input type="checkbox"/> Left <input type="checkbox"/> N/A
_____	_____	<input type="checkbox"/> Right <input type="checkbox"/> Left <input type="checkbox"/> N/A
_____	_____	<input type="checkbox"/> Right <input type="checkbox"/> Left <input type="checkbox"/> N/A
_____	_____	<input type="checkbox"/> Right <input type="checkbox"/> Left <input type="checkbox"/> N/A
Total @ \$250 per golfer:	_____	
Total Enclosed:	=====	
<i>*If paying for individual golfer, please list any pairing requests below:</i>		

***Please return form and
make check payable to :***

St. Thomas Aquinas Catholic School - HSA
Attn: Golf Tournament
1719 Post Road
Fairfield, CT 06824