

## SPONSORSHIP LEVELS

- \$100 - Friend of St. Susan Center
- \$250 - Hole Sponsor
- \$250 - Hole Sponsor In Memory of:

\_\_\_\_\_

- \$500 - Hole Sponsor & Team of 4

Name: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

Phone: \_\_\_\_\_

Email: \_\_\_\_\_

Enclosed is a check for \$ \_\_\_\_\_  
(Payable to St. Susan Center)

- Please Bill Me

Sponsors will be recognized  
on course signage,  
tournament program  
and by media coverage.

Organization or Individual - attach  
business card/company logo, etc.  
if desired.

For more information or questions:  
716-664-2253  
[www.stsusancenter.org](http://www.stsusancenter.org)

### Our Mission:

*"In response to the gospel,  
we freely offer meals, fellowship,  
dignity and respect to all  
who come through our doors."*

**Thanks for your  
support & generosity!**



PO Box 1276  
31 Water Street  
Jamestown, NY 14701-1276  
716-664-2253  
[www.stsusancenter.org](http://www.stsusancenter.org)



## 7th Annual Charity Golf Classic

at



to benefit



**Sunday  
July 30th, 2017**

**Four Person Scramble**

**Men's - Women's  
and Mixed**

## TOURNAMENT INFORMATION

7th Annual  
Charity Golf Classic  
**Sunday, July 30, 2017**  
**Chautauqua Golf Club**  
Route 394  
Chautauqua, New York

- ▶ 11:30 am Registration  
Hot Dogs, Snacks  
and Beverages
- ▶ 1:00 pm Shotgun Start
- ▶ Four-person team scramble:  
Men, Women and Mixed
- ▶ Prizes:  
Closest to the Pin  
Longest Drive
- ▶ Buffet Dinner served at the  
conclusion of play along  
with an Ice Cream  
Sundae Bar!



**2016  
Winners**  
Bill & Kathie  
Johnson  
and  
Joe & Kristie  
Salvaggio



## TEAM ENTRY FORM

\$80/player (Chautauqua Golf Club non-member)  
\$60/player (Chautauqua Golf Club member)

**Golfer 1:** \_\_\_\_\_

Phone: \_\_\_\_\_

Email: \_\_\_\_\_

Chautauqua Golf Club Member:  Yes  No

**Golfer 2:** \_\_\_\_\_

Phone: \_\_\_\_\_

Email: \_\_\_\_\_

Chautauqua Golf Club Member:  Yes  No

**Golfer 3:** \_\_\_\_\_

Phone: \_\_\_\_\_

Email: \_\_\_\_\_

Chautauqua Golf Club Member:  Yes  No

**Golfer 4:** \_\_\_\_\_

Phone: \_\_\_\_\_

Email: \_\_\_\_\_

Chautauqua Golf Club Member:  Yes  No

Please send entry form  
along with fees payable to:  
**St. Susan Center**  
by July 25, 2017.

Download additional registration forms at:  
[www.stsusancenter.org](http://www.stsusancenter.org)

