



# Be a Saint Golf Tournament Registration Form

## Thursday, June 11<sup>th</sup>, 2026

### The Quarry Golf Club

447 Tara Road, Ennismore, ON K0L 1T0

**Yes! We want to support the residents at St. Joseph's at Fleming in the following manner:**

- Lead Sponsor \$5,000 Includes foursome, signage, & speaking opportunity
- Dinner Sponsor **SPONSORED** Includes foursome & signage
- Tasting Tee Sponsor \$2,500 Includes two golfers & signage
- Golf Cart Sponsor \$2,000 Includes two golfers & signage
- Golfer Gift Sponsor **SPONSORED** Includes two golfers & signage
- Sign Sponsor (in-kind) **SPONSORED** Includes logo on all signs donated
- Water Sponsor **SPONSORED** Includes signage on roving cart
- Snack Sponsor **SPONSORED** Includes signage on roving cart
- Hole Sponsor (18 available) \$150 Includes signage on tee

(Per CRA Guidelines, Sponsorships are ineligible for a charitable tax receipt, rather a fully deductible business receipt will be issued. No tax receipts will be issued for foursome or individual golfer purchases)

**\*\*GOLFER REGISTRATION DEADLINE: JUNE 1, 2026\*\***

- Golf Foursome \$700 \*Please list all golfer names on attached sheet
  - Individual Golfer \$175 Quantity: \_\_\_\_\_
  - Dinner Only \$50 Quantity: \_\_\_\_\_ Dietary Restrictions: \_\_\_\_\_
- (Golf game includes 1:00pm shotgun start, carts, longest drive, closest to pin contests, and dinner)

#### Contact Information:

Name: \_\_\_\_\_ Business: \_\_\_\_\_  
 Address: \_\_\_\_\_ City: \_\_\_\_\_  
 Postal Code: \_\_\_\_\_ Phone (Home or Cell): \_\_\_\_\_  
 Email: \_\_\_\_\_

#### Submission Information:

Forms can be emailed to: [scox@sjfltc.com](mailto:scox@sjfltc.com) or faxed to 705-743-7532

#### Payment Options:

- Cheque payable to St. Joseph's at Fleming Foundation enclosed
- Credit Card (we will call you for details)
- Email transfer to [scox@sjfltc.com](mailto:scox@sjfltc.com) (no security question required)
- Send an invoice and we will pay



## Golfer Information & Dietary Restrictions:

1. Name: \_\_\_\_\_ Dietary Restrictions: \_\_\_\_\_  
Email: \_\_\_\_\_ Phone: \_\_\_\_\_
2. Name: \_\_\_\_\_ Dietary Restrictions: \_\_\_\_\_  
Email: \_\_\_\_\_ Phone: \_\_\_\_\_
3. Name: \_\_\_\_\_ Dietary Restrictions: \_\_\_\_\_  
Email: \_\_\_\_\_ Phone: \_\_\_\_\_
4. Name: \_\_\_\_\_ Dietary Restrictions: \_\_\_\_\_  
Email: \_\_\_\_\_ Phone: \_\_\_\_\_