



**YOU ARE INVITED TO THE
INAUGURAL
ANGELMAN
SYNDROME
GOLF EVENT**

PRESENTED BY THE CHILDREN'S IMPACT FOUNDATION
Monday, September 13th, 2010 / 12 PM at Coppinwood



INAUGURAL ANGELMAN SYNDROME GOLF EVENT

Monday, September 13th, 2010
12 PM at Coppinwood (Uxbridge)
www.coppinwood.com

REGISTRATION FORM

GENERAL INFORMATION

Individual/company name (as to appear in event materials)

Name and title of primary contact

Address

City Postal Code

Phone Email

SPONSOR LEVELS

Dinner Sponsor (includes two foursomes)	\$5,000	<input type="checkbox"/>	<input type="text"/>
Cocktail Reception Sponsor (includes one foursome)	\$3,000	<input type="checkbox"/>	<input type="text"/>
Lunch Sponsor (includes one foursome)	\$3,000	<input type="checkbox"/>	SOLD
Golf Ball Sponsor (includes one foursome)	\$2,500	<input type="checkbox"/>	SOLD
Individual foursomes	\$2,000	<input type="checkbox"/>	<input type="text"/>
Hole Sponsorships	\$500	<input type="checkbox"/>	<input type="text"/>
Individual Player	\$500	<input type="checkbox"/>	<input type="text"/>
TOTAL		<input type="checkbox"/>	<input type="text"/>

Please check this box if you would require a tax receipt for your charitable donation.

If you cannot attend, but wish to make a donation, your cheque should be made payable to Charity Event for CASS and Darling Home for Kids and sent to Kieran Young at the following address:

DGM Holdings (Canada) Inc.
The Exchange Tower
130 King Street West, Suite 1800
Toronto, ON M5X 1E3
Fax: 416-947-0167

Email: kyoung@dgmgroup.com

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ANGELMAN SYNDROME GOLF EVENT REGISTRATION

PLAYER INFORMATION

Golfer's name

Handicap

Shoe size

Shirt size

Email

1.	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
2.	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
3.	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
4.	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

PLEASE EMAIL OR FAX YOUR COMPLETED REGISTRATION FORM TO:

Attention: Kieran Young
Email: kyoung@dgmgroup.com
Fax: 416-947-0167

DGM Holdings (Canada) Inc.
The Exchange Tower
130 King Street West, Suite 1800
Toronto, ON M5X 1E3

To hold your foursome, registration fees must be paid by **Friday, August 27th, 2010**
(please have your cheque, payable to "Charity Event for CASS and Darling Home for Kids", delivered or mailed to Kieran Young's attention at the address above)

www.darlinghomeforkids.ca

www.angelmancanada.org

Information on Angelman Syndrome can be found on [YouTube](#)

