



Brethren Village Retirement Community

GOLF REGISTRATION FORM

SEPTEMBER 9, 2010

PLEASE INDICATE ONE AM Scramble OR PM Scramble

GOLFER INFORMATION (Please Print or Type)

Golfer 1	Name	
1	Address	
	City	
	State & Zip	
Golfer 2	Name	
2	Address	
	City	
	State & Zip	
Golfer 3	Name	
3	Address	
	City	
	State & Zip	
Golfer 4	Name	
4	Address	
	City	
	State & Zip	

TOTAL NUMBER OF GOLFERS: _____ @ \$65 EACH = \$ _____

ADDITIONAL DINNERS: (PERSONS NOT GOLFING) _____ @ \$20 EACH = \$ _____

SPONSORSHIP AMOUNT: _____ = \$ _____

TOTAL AMOUNT: _____ = \$ _____

PAYMENT INFORMATION

Payment Type (Choose 1)	<input type="checkbox"/> Check (Check Payable to: Brethren Village Retirement Community) <input type="checkbox"/> Credit (Information Requested Below: VISA or MasterCard Donations Only)
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CREDIT CARD INFORMATION

Name on Credit Card	
Card Type (VISA or MasterCard)	
Card Number	
Card Verification Number	
Expiration Date (Month/Year)	
Authorizing Signature	

Return this Golf Registration Form with either check or credit card information to:
 Brethren Village Retirement Community, Attn: Development Department
 3001 Lititz Pike, P.O. Box 5093, Lancaster, PA 17606-5093
 Telephone: 717-581-4316 ~ Facsimile: 717-581-4300 ~ Toll Free: 1-800-367-9899