UH Hilo Alumni and Friends

13th Annual Scholarship Tournament*

Golf & Luncheon at the Kings’ - Registration Form

*Proceeds to benefit UH Hilo Alumni and Friends Scholarship Fund and the Association.

Date: Saturday, October 22, 2016
Time: 7:00 am registration, 8:00 am tee-off
Location: Waikoloa Beach Kings’ Course

Entry Fee: $180 per person includes closest to the pin on all par 3’s, 2 FREE mulligans per person, green fees, cart, & scrumptious All You Can Eat awards banquet!
Format: 2-person scramble
Shotgun start at 8:00am
Handicap: 30% of team’s September handicap applied to figure team net score

Rules: USGA rules will govern Tournament as modified by local course rules and hole in one prize opportunity. The committee will have final decision in the event of any disputes.

Registration and Payment Deadline: October 14, 2016

Please Print Legibly:

(1) Name: ______________________________________ Handicap: ________ Sex: M or F (circle one)
   Mailing Address:____________________________________ Email:________________________ Phone:__________

(1) Name: ______________________________________ Handicap: ________ Sex: M or F (circle one)
   Mailing Address:____________________________________ Email:________________________ Phone:__________

(2) Name: ______________________________________ Handicap: ________ Sex: M or F (circle one)
   Mailing Address:____________________________________ Email:________________________ Phone:__________

(2) Name: ______________________________________ Handicap: ________ Sex: M or F (circle one)
   Mailing Address:____________________________________ Email:________________________ Phone:__________

Please fill in info above and below. Mail completed form with payment to: Dale Tokuuke
110 Hualalai St.
Hilo, HI 96720

***Make Checks Payable to UHF/UH Hilo Alumni & Friends***

Visa □ Master Card □ Charge my credit card in the amount of $______________________________
Name on card:________________________________________ Phone number:________________________
Credit card number:________________________________________ Expiration Date(month/year):__________
Billing address on card________________________________________ 3-digit Security Code on back of card_________
I authorize the University of Hawaii Foundation to charge my credit card: ___________________________
E-mail address______________________________

Unfortunately, I am unable to attend, but my tax-deductible gift of $____________ is enclosed to help the alumni scholarship fund and the association.