UH Hilo Alumni and Friends
14th 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 21, 2017
Time: 7:00 am registration, 8:00 am tee-off
Location: Waikoloa Beach Kings’ Course
Entry Fee: $185 per person includes closest to the pin on all par 3’s, putting contest, 2 FREE mulligans per person, green fees, cart, & scrumptious All You Can Eat awards banquet!
Format: 2-person scramble. Shotgun starts at 8:00am
Handicap: 50% 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: Wednesday, August 31, 2017

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________________________________________
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.