UH Hilo Alumni and Friends 10th Annual Scholarship Golf Tournament
Player Registration Form

Date: Saturday, October 26, 2013
Time: 7:00 am registration, 8:00 am tee-off
Location: Waikoloa Beach Course

Entry Fee: $185 per person, includes closest to the pin on par 3’s, hole in one, 2 FREE mulligans per person, premium golf shirt, green fees, cart, lunch & goodies!
Format: 2 man scramble
Shotgun start at 8:00am
Handicap: 30% of team’s September handicap applied to figure team net score

Prizes: 1st hole in one wins a prize (hole to be announced)
Lucky Number Drawing Grand Prize plus a whole lot more!

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: Friday, October 18, 2013

Each player will be provided with a commemorative polo shirt. Please be sure to circle your shirt size accordingly.

(1) Name: ____________________________ Handicap______ Shirt Size: S, M, L, XL, XXL
Address:______________________________ Phone:___________ Sex: M or F (circle one)

(1) Name: ____________________________ Handicap______ Shirt Size: S, M, L, XL, XXL
Address:______________________________ Phone:___________ Sex: M or F (circle one)

(2) Name: ____________________________ Handicap______ Shirt Size: S, M, L, XL, XXL
Address:______________________________ Phone:___________ Sex: M or F (circle one)

(2) Name: ____________________________ Handicap______ Shirt Size: S, M, L, XL, XXL
Address:______________________________ Phone:___________ Sex: M or F (circle one)

Mail completed form to: UH Hilo University Relations, Marketing and Alumni
200 Kawili Street, Hilo HI 96720
Ph# 974-7501/974-7643; Fax# 974-7714

*Make Checks Payable to UHF/UHH Alumni & Friends or

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: _______________________

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