

# DOMINICAN XXII GOLF TOURNAMENT REGISTRATION FORM

Monday, April 26, 2010  
StoneTree Golf Club • Novato, California

*Please complete the form below.*

1.	Name:	Phone:
	Address:	Current handicap, index, or average score:
	E-mail:	Fee Enclosed: \$
2.	Name:	Phone:
	Address:	Current handicap, index, or average score:
	E-mail:	Fee Enclosed: \$
3.	Name:	Phone:
	Address:	Current handicap, index, or average score:
	E-mail:	Fee Enclosed: \$
4.	Name:	Phone:
	Address:	Current handicap, index, or average score:
	E-mail:	Fee Enclosed: \$

Tournament Fee: \$250 for single golfers | \$225 each for a foursome  
For more information or to register by phone, please call Jane Winter at 415-458-3762.

Please refrain from sharing the enclosed information with tournament sponsors and vendors.

Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ ZIP \_\_\_\_\_

Phone \_\_\_\_\_ E-mail \_\_\_\_\_

Tournament fees (\$250 for single golfers | \$225 each for a foursome) \$ \_\_\_\_\_

Penguin Pack (\$75) \$ \_\_\_\_\_

Raffle tickets (\$75 for 12) \$ \_\_\_\_\_

Dinner only fee (\$75 per person/\$50 golfer guest) \$ \_\_\_\_\_

Name of dinner guest \$ \_\_\_\_\_

I cannot attend the Tournament or dinner, but I am enclosing  
a tax-deductible donation to Dominican Athletics \$ \_\_\_\_\_

**Grand Total** \$ \_\_\_\_\_

Enclosed is my check for \$ \_\_\_\_\_ *(made payable to Dominican University of California)*

Visa    MasterCard

Cardholder: \_\_\_\_\_

Card Number: \_\_\_\_\_ Exp. Date: \_\_\_\_\_

Signature: \_\_\_\_\_

*RSVP by Friday, April 16, 2010.*

Mail your registration form and payment to:

Office of External Relations

Dominican University of California

50 Acacia Avenue

San Rafael, CA 94901