

10th Annual SCC Golf Classic Registration Form

*Group and individual registrations are welcome!
Be sure to get in quick as there are only 100 registrations available*

Company Name: _____

Contact Name: _____

Address: _____

Suburb: _____ Postcode: _____

Phone: _____ Mobile: _____

Email: _____

Cost is \$349.00 per player

Player 1 Name: _____

Player 2 Name: _____

Player 3 Name: _____

Player 4 Name: _____

Please tick the box if player will **NOT** be attending the lunch

Number of extra guests attending the deluxe barbeque lunch at \$110.00 each _____

Name of guests attending lunch: _____

Please let us know if you or any guests have any specific dietary requirements:

Please send your completed registration form to Alice Hennessy at:

Southern Cross Care (WA) Inc

PO Box 76

BURSWOOD WA 6100

Alternatively fax to: (08) 9282 9999 or email: ahennessy@scrosswa.org.au

BY FRIDAY 2 MARCH 2012