

**Registration Form continued...**

Company: \_\_\_\_\_

Contact: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_

State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Phone: \_\_\_\_\_

**Golfers**

Name	T-Shirt Size
1. _____	_____
2. _____	_____
3. _____	_____
4. _____	_____

**Dinner Only**

- \_\_\_\_\_
- \_\_\_\_\_



Spooner Golf Club  
 W6120 County Highway H  
 Spooner, WI 54801  
 715-635-3580

*3rd Annual*

**Spooner Health System  
Golf Outing**



**Winners will receive**

**Pro Shop Credit:**

- 1st Place—\$500 (\$125 each)
- 2nd Place—\$300 (\$75 each)
- 3rd Place—\$200 (\$50 each)



There will also be numerous prizes given out for mulligan drawing, hole events, course games, putting contest and other drawings.



819 Ash Street  
 Spooner, WI 54801  
 Phone: 715-635-2111

**QUALITY** in Community Healthcare™

**Wednesday  
 August 11, 2010  
 Spooner Golf Club**

# 3rd Annual Spooner Health System Golf Outing

Date: Wednesday, August 11, 2010

Time: 1:00 p.m. Shotgun Start

6:00 p.m. Dinner

Where: Spooner Golf Club



Proceeds from our 2008 & 2009 Golf Outings were used toward the purchase of Automatic Doors in our Nursing Home Entrance. Proceeds from this years event will be used to support other capital projects at Spooner Health System.

Spooner Health System's mission is to provide high quality health care.

Spooner Health System is comprised of a 25-bed Critical Access Hospital, a 90-bed Skilled Nursing Facility, and Home Care.

## Hole Sponsorships

### PLATINUM Sponsorship

- Entry for a 4 person team
- 4 camping chairs

### GOLD Sponsorship

- Entry for 2 players
- 2 camping chairs

### SILVER Sponsorship

- Entry for 1 player
- 1 camping chair



## Golf Scramble

Entry fee is \$75 per person for 18 hole golf scramble, power cart, dinner, t-shirt and sleeve of balls. There will also be prizes for mulligan raffle, hole events, course games and putting contest.

\* A portion of your fee is tax deductible.

## Mulligans

Mulligans may be purchased at the course with a separate raffle ticket for each. 1 for \$5 or 9 for \$40. Maximum per team is 9.

## Dinner Only

Non-golfers are invited to join those golfing for dinner at 6:00 pm for \$25. Pre-registration is required.

## Registration/Sponsorship Form

- I want to be a PLATINUM Sponsor (\$1,000)
- I want to be a GOLD Sponsor (\$500)
- I want to be a SILVER Sponsor (\$200)
- Please register \_\_\_\_\_ playing participant(s) (\$75 each)
- I would like to attend the dinner only(\$25)  
# attending \_\_\_\_\_
- I am unable to attend, but would like to donate \$\_\_\_\_\_.

Total \_\_\_\_\_

**Please be sure to fill out the information located on the back of this page when sending in payment.**

If you have any questions or would like more information, please contact Crystal Potter at [cpotter@spoonerhealthsystem.com](mailto:cpotter@spoonerhealthsystem.com) or 715-635-1227.

### Mail Payment and Registration Form by **August 1st** to:

Spooner Health System  
Attn: Crystal Potter  
819 Ash Street  
Spooner, WI 54801