



# CVIM Golf Classic Registration Form

**Honorary Chair: Joe McLaughlin**  
 Chairman & CEO, The Haverford Trust Company

**Co-Chairs: Diego Calderin & Ted Pacitti**

**FIRST CHOICE:** \_\_\_ Morning Flight \_\_\_ Afternoon Flight [Assignment determined on first come first serve basis.]

Contact Name/Company: \_\_\_\_\_

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

City/State/Zip: \_\_\_\_\_

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

Email: \_\_\_\_\_

[required for updates]

Sponsorship Level: \_\_\_\_\_ Sponsorship Amount: \_\_\_\_\_

*Make Checks Payable To: CVIM*

Please charge my: \_\_\_ Mastercard \_\_\_ Visa \_\_\_ AMEX

Card # \_\_\_\_\_ CVV # \_\_\_\_\_ Exp. Date \_\_\_\_\_

Signature [*required*]: \_\_\_\_\_

Please list Golfers: [Provide names/emails/handicaps as soon as you recruit your foursome]

	<u>Golfer Name</u>	<u>Email Address</u>	<u>Handicap</u>
1.	_____	_____	_____
2.	_____	_____	_____
3.	_____	_____	_____
4.	_____	_____	_____

# of Golf Cart(s) Requested: \_\_\_\_\_ Note: Applebrook is a walking course, so a limited number of golf carts are available for medical purposes only. Pre-registration will ensure a cart will be prepared for you at the tournament.

Sorry, can't play this year – BUT PLEASE ACCEPT THIS DONATION

**COMPLETE and RETURN TO:**

Catherine Binz | Phone: 610.836.5990 Ext. 134 | [cbinz@cvim.org](mailto:cbinz@cvim.org) | Fax: 610.836.5998

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