

# Join Us for Fun on the Fairway

at the 16<sup>th</sup> Annual PSATS  
Trustees Insurance Program  
Golf Tournament



*Sunday, April 18, 2010 • Hershey Links*

## TOURNAMENT INFORMATION

- DATE:** Sunday, April 18, 2010
- FORMAT:** Shamble
- PLACE:** Hershey Links
- TIME:** 9:30 a.m. - Driving Range Open (range balls included in fee)  
10:00 a.m. - Registration and Check-In  
10:50 a.m. - Review Tournament Rules of Play  
11:00 a.m. - Shotgun Start  
4:00 p.m. - Tournament Concludes
- LUNCH:** A boxed lunch will be provided to each golfer at the start of the tournament.
- FEE:** \$110 for those registered to attend the PSATS Annual Conference; \$160 for all others.
- PRIZES:** Prizes will be awarded for first-, second-, and third-place teams and hole-in-one contests.
- ATTIRE:** Proper club attire is required for the course: slacks, golf shorts, skirts, collared shirts.
- Questions? Call James Wheeler at the State Association at (717) 763-0930.

## Golfer # 1 Registration Form

Name: \_\_\_\_\_

Township/County or Firm: \_\_\_\_\_

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

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

Phone Number: (\_\_\_\_\_) \_\_\_\_\_

Fee: \_\_\_\_ Conference attendee = \$110      \_\_\_\_ Not attending the conference = \$160

*Check here if registering any playing partner(s) — see reverse.*

**Return each completed form, along with a check made payable to “PSATS,” to:  
PSATS Golf, 4855 Woodland Drive, Enola, PA, 17025, or by FAX to (717) 763-9732.**

## Golfer #2 Registration Form

Name: \_\_\_\_\_

Township/County or Firm: \_\_\_\_\_

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

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

Phone Number: (\_\_\_\_\_)\_\_\_\_\_

Fee:

\_\_\_\_ Conference attendee = \$110      \_\_\_\_ Not attending the conference = \$160

## Golfer #3 Registration Form

Name: \_\_\_\_\_

Township/County or Firm: \_\_\_\_\_

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

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

Phone Number: (\_\_\_\_\_)\_\_\_\_\_

Fee:

\_\_\_\_ Conference attendee = \$110      \_\_\_\_ Not attending the conference = \$160

## Golfer # 4 Registration Form

Name: \_\_\_\_\_

Township/County or Firm: \_\_\_\_\_

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

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

Phone Number: (\_\_\_\_\_)\_\_\_\_\_

Fee:

\_\_\_\_ Conference attendee = \$110      \_\_\_\_ Not attending the conference = \$160

**Return this form, along with one check made payable to "PSATS," to:  
PSATS Golf, 4855 Woodland Drive, Enola, PA, 17025, or by FAX to (717) 763-9732.**