



2011 Golf Outing July 14, 2011



Silver Lakes Country Club ~ Orland Park, IL

Where: Silver Lake Country Club
14700 S. 82nd Ave.
Orland Park IL

Cost: \$130 per player - includes green fees,
cart, continental breakfast, hotdog & pop,
open bar, dinner and door prizes
\$65 per person - Dinner ONLY

When: Thursday, July 14, 2011
Sign-in: 7:45 a.m.
Start Time: 9:15 a.m. Shotgun Scramble

Prizes: Longest Drive • Betting Hole •
Closest to the Pin • Hole in One

Trophy: Lowest Grossing Team- Each Course

Registrants' Names:

(Make copies if more than four)

Check one box for each registrant:

Type:

(Associate/ Contractor)

- | | | | |
|----------|--|--|---|
| 1. _____ | <input type="checkbox"/> Golfer- \$130 | <input type="checkbox"/> Dinner Only- \$65 | <input type="checkbox"/> A <input type="checkbox"/> C |
| 2. _____ | <input type="checkbox"/> Golfer- \$130 | <input type="checkbox"/> Dinner Only- \$65 | <input type="checkbox"/> A <input type="checkbox"/> C |
| 3. _____ | <input type="checkbox"/> Golfer- \$130 | <input type="checkbox"/> Dinner Only- \$65 | <input type="checkbox"/> A <input type="checkbox"/> C |
| 4. _____ | <input type="checkbox"/> Golfer- \$130 | <input type="checkbox"/> Dinner Only- \$65 | <input type="checkbox"/> A <input type="checkbox"/> C |

Non-cancelable after July 13th

TOTAL \$ _____

Save time and register online!
www.crca.org click on events

Contact Person:

Name: _____ Phone: _____ Fax: _____

Company: _____ Email: _____

Address: _____ City: _____ State: _____ Zip: _____

Payment

Charge Credit Card Check Enclosed Please Send Invoice

Card Number _____ Exp. Date _____

Name on Card _____ Signature _____

Billing Address _____ City _____ State _____ Zip _____

Phone: _____ E-mail (for receipt) _____

FAX to: (708) 449-0837 Mail to: CRCA • 4415 W. Harrison St., Suite 436 • Hillside, IL 60162

Questions? (708) 449-3340

DEADLINE: JULY 12, 2011