

**Down Syndrome Foundation  
Charity Golf Classic  
Monday July 13, 2009  
North Oaks Golf Club**

**Golfers**, please complete this form and return it along with your check made payable to:  
Down Syndrome Foundation  
10750 Old County Road 15 Plymouth, MN 55442  
PH: 763-545-4000 FAX: 763-544-0354

Inquiries or additional forms:  
Larry P. Larson PH: 763-545-4000 or [Larry@LPLarsonCPA.com](mailto:Larry@LPLarsonCPA.com)

Limited registration, please respond as soon as possible

**1. Name** \_\_\_\_\_ **Address** \_\_\_\_\_

City \_\_\_\_\_ Shirt Size – circle one: S M LG XL XXL

State \_\_\_\_\_ Zip \_\_\_\_\_ Home ph: \_\_\_\_\_ Bus ph: \_\_\_\_\_

\_\_\_\_\_ Amount enclosed (\$300.00 per player) (\$100.00 tax deductible)

\_\_\_\_\_ Golfer(s) will attend dinner

\_\_\_\_\_ Additional dinner guests at \$60.00 per person

\_\_\_\_\_ Please assign me a partner

\_\_\_\_\_ I cannot participate, please accept my contribution \_\_\_\_\_

I want to be in a five-some with:

**2. Name** \_\_\_\_\_ **Address** \_\_\_\_\_

City \_\_\_\_\_ Shirt Size – circle one: S M LG XL XXL

State \_\_\_\_\_ Zip \_\_\_\_\_ Home ph: \_\_\_\_\_ Bus ph: \_\_\_\_\_

**3. Name** \_\_\_\_\_ **Address** \_\_\_\_\_

City \_\_\_\_\_ Shirt Size – circle one: S M LG XL XXL

State \_\_\_\_\_ Zip \_\_\_\_\_ Home ph: \_\_\_\_\_ Bus ph: \_\_\_\_\_

**4. Name** \_\_\_\_\_ **Address** \_\_\_\_\_

City \_\_\_\_\_ Shirt Size – circle one: S M LG XL XXL

State \_\_\_\_\_ Zip \_\_\_\_\_ Home ph: \_\_\_\_\_ Bus ph: \_\_\_\_\_

**5. Name** \_\_\_\_\_ **Address** \_\_\_\_\_

City \_\_\_\_\_ Shirt Size – circle one: S M LG XL XXL

State \_\_\_\_\_ Zip \_\_\_\_\_ Home ph: \_\_\_\_\_ Bus ph: \_\_\_\_\_