



**EARLY BIRD**  
**REGISTRATION**

*Register & Pay for your foursome  
by June 1<sup>st</sup> in order to be  
eligible...*

**NKF Golf Classic Registration Form**  
**The Thousand Islands County Club**  
**Wellesley Island, NY**  
**Monday, June 25<sup>th</sup>, 2010**

Tournament Date: Monday June 25<sup>th</sup>, 2010  
Registration: 10:15 am - 11:00 am shotgun start  
Entry Fees Standard Foursome \$1,200.00  
Foursome & Tee Sign \$1,700.00

Fax page 2 of this form to  
315.476.3707 Attn: NKF Golf Classic

***EVENT SPONSORSHIPS AVAILABLE***

Mail to: NKF of Central NY  
731 James Street  
Syracuse, NY 13202  
Attn: NKF Golf Classic

**HOW TO FORM A TEAM**

- Any amateur golfer, male or female, is eligible to compete in the 2010 National Kidney Foundation of CNY Golf Classic.
- Every team competing in the NKF Golf Classic must consist of four amateur golfers whose combined USGA Handicap Indexes total 42.0 or more.
- A team may only have one member whose USGA Handicap Index is 8.0 or lower. (all four team members may compete with USGA handicap indexes higher than 8.0. There is no maximum limit to each teams total USGA handicap - index).
- Golfer's handicaps are effective as of the latter of: (1) the day of registration for the tournament or (2) the day that falls 60 days prior to the event.
- Any golfer wishing to participate that does not have a USGA Handicap Index must provide score cards attested to by a PGA Professional from which an "Invitational Handicap" will be calculated in accordance with USGA Rules.
- Each golfer who has a USGA Handicap Index will be required to present a current copy of his or her handicap card to the tournament committee at the time of registration.
- All golfers will be required to present a photo ID on the day of the event.
- Any team that contains a member who does not comply with each of these requirements will not be eligible to win prizes or qualify to be invited to the National Finals.
- The National Kidney Foundation has the right to deny entry of any players or teams.

**TEAM USGA HANDICAP INDEX**

All handicap disputes shall be settled by arbitration with the USGA (or governing state golf association) in accordance with USGA rules, and the decision rendered by the arbitrator may be entered in any court having jurisdiction thereof. Any golfer who is found to have misinterpreted his/her USGA Handicap shall be disqualified. The NKF Golf Classic reserves the right to report flagrant infractions to the golfers state golf association and the USGA.

NKF Golf Classic Tournament Committee decisions are final and are not subject to appeal. This rules does not prevent a Committee from correcting and incorrect ruling and imposing or rescinding a penalty.

**Each Golfer Receives a Special Golfer's Gift Package.**  
**Your tournament entry includes lunch, dinner, awards, and contest entry**  
**First and Second Place Teams advanced to the NKF Golf Classic National Championship**  
**at Pebble Beach in January 2011**



# 2010 NKF Golf Classic Foursome Profile

Monday, June 25<sup>th</sup>, 2010  
The Thousand Islands Country Club, Wellesley Island, NY  
Registration – 10:15 am  
Box Lunch 10:45am  
Shotgun Start 11:00 am  
Cocktail Reception 5:00 pm  
Awards/Dinner 6:00 pm

**EARLY BIRD**  
**REGISTRATION:**  
*Register & Pay for your  
foursome by June 1<sup>st</sup> in order to  
be eligible...*

**Team Captain:**

Name \_\_\_\_\_ Company \_\_\_\_\_  
Address \_\_\_\_\_  
City, St Zip \_\_\_\_\_ Phone \_\_\_\_\_  
Email \_\_\_\_\_ Handicap Index \_\_\_\_\_ GHIN # \_\_\_\_\_  
Home course \_\_\_\_\_ HC Phone # \_\_\_\_\_ Golf Pro: \_\_\_\_\_



**2<sup>nd</sup> player:**

Name \_\_\_\_\_ Company \_\_\_\_\_  
Address \_\_\_\_\_  
City, St Zip \_\_\_\_\_ Phone \_\_\_\_\_  
Email \_\_\_\_\_ Handicap Index \_\_\_\_\_ GHIN # \_\_\_\_\_  
Home course \_\_\_\_\_ HC Phone # \_\_\_\_\_ Golf Pro: \_\_\_\_\_



**3<sup>rd</sup> player:**

Name \_\_\_\_\_ Company \_\_\_\_\_  
Address \_\_\_\_\_  
City, St Zip \_\_\_\_\_ Phone \_\_\_\_\_  
Email \_\_\_\_\_ Handicap Index \_\_\_\_\_ GHIN # \_\_\_\_\_  
Home course \_\_\_\_\_ HC Phone # \_\_\_\_\_ Golf Pro: \_\_\_\_\_



**4<sup>th</sup> player:**

Name \_\_\_\_\_ Company \_\_\_\_\_  
Address \_\_\_\_\_  
City, St Zip \_\_\_\_\_ Phone \_\_\_\_\_  
Email \_\_\_\_\_ Handicap Index \_\_\_\_\_ GHIN # \_\_\_\_\_  
Home course \_\_\_\_\_ HC Phone # \_\_\_\_\_ Golf Pro: \_\_\_\_\_

