



Join Us

Sunday September 16, 2007

Airways Golf Course, West Suffield
18 Hole Scramble; 9:00AM -Shotgun Start

The 4th Annual Golf Tournament

To benefit

ALLIED'S



A Sports Training Program for more than 110
Developmentally Disabled athletes from **East Windsor,
Enfield, Somers, Stafford, Suffield, Manchester,
Windsor Locks** and surrounding towns who compete in the
Special Olympics throughout Connecticut.

Sponsored by

Corky's Auto Parts & Spring Street Service Center

- \$80 Entry fee includes 18 holes of Golf, Cart, Beverages & Lunch !!! (\$75 if received before June 30)
- Tee Sponsor Opportunities Starting at \$75

Contact Karen Owens 627-7495 or Frank Ravenola 623-9964 for Reservations & Sponsorship Opportunities



Greetings,

Sunday, September 16th is the date for this year's tournament which will be, once again, held at Airways Golf Course in Suffield. Tee off is at 9:00AM. The \$80 fee per golfer includes 18 holes of golf with cart, barbeque lunch and beverages.

As longtime supporters of Allied's Enfield Stars, we would like to invite you to participate in our 4th Annual Golf Tournament. We have a lot of fun while raising money for Allied's Enfield Stars. For 2007, we have set a more aggressive fundraising goal and now, we need your help

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Please Complete and Return Forms by August 31 to

*** SPONSORSHIPS LEVELS**

- Lunch Sponsor - \$ 500 4 Golfers and a Sign in the Pavilion
- Golf Cart Sponsor - \$ 300 2 Golfers and Signs on all Carts
- Beverage Sponsor - \$ 250 2 Golfers and a Sign on the Pavilion
- Closest to the Pin - \$ 150 1 Golfer and a Sign on the Tee Box
- Longest Drive - \$ 150 1 Golfer and a Sign on the Tee Box
- Tee sponsors - \$75 Sign on the Tee Box

Name to appear on Sign _____

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*** DONATIONS**

____ Donation of the following prize(s) and /or giveaway items (plan for 120 items for all golfers)

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Golfer Registration

#1 Golfer's Name _____ Business Name _____

Address _____

Town _____ State _____ Zip _____

Phone _____ Cell _____ Email _____

I will be playing on a team with #2 _____

#3 _____ #4 _____

Total Payment Enclosed _____ Check Payable to **Allied Rehabilitation Centers.**

Please return Registration Form & Payment by August 31 to *Spring Street Service Center, 436 Spring Street, Windsor Locks, CT 06096 or Corky's Auto Parts 430 Spring Street, Windsor Locks ,CT 06096*

