



# 6th ANNUAL ACDI OPEN CHARITY GOLF TOURNAMENT

*Benefiting*

St. Jude Children's Hospital and  
Christmas Cash for Kids



## Clustered Spires Golf Course

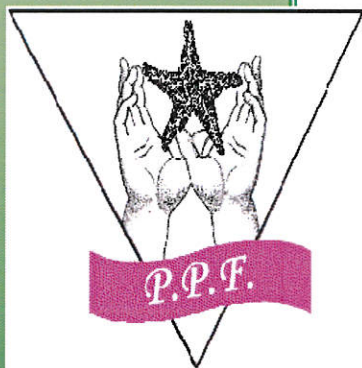
**Friday, October 3, 2014**  
**9:00 am Shotgun Start**

*Registration begins at 8:00 am*  
*Captain's Choice Play with 4 player teams*

**\$85 per person/ \$340 per team**

*Includes lunch & refreshments*

**In Association with**  
**The Patty Pollatos Fund**



# Door Prizes!!



**To register for this event complete and return the registration form by 9/1/14**

### Contact Information:

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# ACDI Registration/Donation Form

**I wish to contribute to this charity event by:**

Name: \_\_\_\_\_ Phone: \_\_\_\_\_ Shirt size: \_\_\_\_\_

## Individual/ Team Options

Entering to play \$85.....\$ \_\_\_\_\_

Entering a team to play \$340.....\$ \_\_\_\_\_

Name/company \_\_\_\_\_

Shirt size: \_\_\_\_\_

Address \_\_\_\_\_

Name/company \_\_\_\_\_

Shirt size: \_\_\_\_\_

Address \_\_\_\_\_

Name/company \_\_\_\_\_

Shirt size: \_\_\_\_\_

Address \_\_\_\_\_

Making a cash donation of .....\$ \_\_\_\_\_

## Corporate Options

Entering a team to play and an exclusive hole sign \$625.....\$ \_\_\_\_\_

Donating goodie bag items (Minimum of 100 items needed)

Exclusive Hole Sign \$300 .....\$ \_\_\_\_\_

Inclusive Hole Sign at the putting green \$100.....\$ \_\_\_\_\_

Scoreboard Sign (8 ½ x 11) \$50.....\$ \_\_\_\_\_

Total Contribution.....\$ \_\_\_\_\_

(Note: this is tax deductible a receipt will be provided upon request)

**Payment method: Check \* Visa \* Master Card \* Discover (Make checks payable to PPF Inc.)**

Email forms to: dleyh@acdi.com, bheinrich@acdi.com or jlane@acdi.com

or

Send via mail to: 5350 Partners Ct. Frederick MD, 21703 attn: Charity Golf