

2009 St. Vincent Mercy Hospital  
*Golf Outing*  
Cattails Golf Club, Elwood, IN  
June 5, 2009

Presenting Sponsor:  
*Burnette-Dellinger*  
*Insurance Agency*

Schedule of Events

**Lunch & Registration:** 11:00 - 12:30  
**Shot Gun Start:** 12:30  
**Putting Contest** 12:30 - 4:00  
**Cash Bar & Appetizers:** 4:30  
**Awards:** Approx. 5:00

If bad weather forces the golf course to close, the tournament will be cancelled and participants given rain checks for a round of golf and cart for use in the future.

Tournament Details

- 4 person team
- \$125 per player (greens fees, cart, beverages, lunch, appetizers, fun and prizes)
- Florida scramble
- \$500 in gift certificates for 1st place
- \$300 in gift certificates for 2nd place
- \$100 in gift certificates for 3rd place
- Putting contest, guaranteed winner
- Drive thru registration
- Registration deadline - May 22, 2009
- Soft spikes only, please

Registration

TEAM

- Individual player fee \$125  
 Team fee \$500

TEAM & PACKAGE

- (2 mulligans & 3 50/50 chances - \$25 value)  
 Individual cost w/package \$150  
 Team cost w/package \$600

- I am unable to play this year, but have enclosed donation. All donations are tax deductible to the fullest extent of the law.

Team Information

Team Captain: \_\_\_\_\_  
Phone: \_\_\_\_\_  
Address: \_\_\_\_\_  
Email: \_\_\_\_\_

Player 2: \_\_\_\_\_  
Phone: \_\_\_\_\_  
Address: \_\_\_\_\_  
Email: \_\_\_\_\_

Player 3: \_\_\_\_\_  
Phone: \_\_\_\_\_  
Address: \_\_\_\_\_  
Email: \_\_\_\_\_

Player 4: \_\_\_\_\_  
Phone: \_\_\_\_\_  
Address: \_\_\_\_\_  
Email: \_\_\_\_\_

Please return completed form on or before May 22, 2009, and check payable to:  
St. Vincent Mercy Hospital Foundation  
1331 South A Street, Elwood, IN 46036  
765/552-4768 [alcollin@stvincent.org](mailto:alcollin@stvincent.org)