

**“Swing for Hope”**  
**Golf Tournament Registration Form**

Please provide us with your contact information:

**Team Captain:**

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ St \_\_\_\_\_ Zip \_\_\_\_\_

Phone: \_\_\_\_\_

E-mail: \_\_\_\_\_

**Your team:**

Player Two \_\_\_\_\_

Player Three \_\_\_\_\_

Player Four \_\_\_\_\_

I don't have a partner, please pair me.

Dinner and Raffles only

Please remit check and registration form to:

Pine Brook Camp

210 Lakeview Road

Shutesbury, MA 01072

REGISTRATION DEADLINE: September 28th