



INLAND BEHAVIORAL & HEALTH SERVICES, INC.'S
 5TH ANNUAL GOLF TOURNAMENT
 JUNE 19, 2009

REGISTRATION FORM

INFORMATION

(please print)

COMPANY NAME: _____

CONTACT PERSON: _____

ADDRESS: _____

PHONE: _____ FAX: _____

EMAIL: _____

HOLE SPONSORSHIPS

- _____ Hole Sponsor(s) \$125 each
- _____ Sand Trap Sponsor(s) \$ 75 each

Total: \$ _____

GOLF PARTICIPATION

(Please fill out player registration on back of this page)

- | | <i>Early Regist.</i> | <i>Late Regist.</i> |
|---|----------------------|---------------------|
| <input type="checkbox"/> Team of 4 Players | \$400 | \$500 |
| <input type="checkbox"/> Individual Player | \$100 | \$125 |
| <input type="checkbox"/> Mulligan (1 set per player only) | 2/\$5 | 2/\$5 |

Total: \$ _____

DONATIONS

- I/We are unable to attend the event, but please accept my/our donation for the amount of: \$ _____
- Please accept the following donation(s) to use as Raffle/Tee Prize(s): _____

TOTALS

Hole Sponsorship Total: \$ _____
 Sand Trap Sponsorship Total: \$ _____
 Donations Total: \$ _____
 Golf Participation Total: \$ _____

GRAND TOTAL: \$ _____

METHOD OF PAYMENT

- Check (payable to IBHS) Money Order (payable to IBHS) Cashier's Check (payable to IBHS) Cash
- Credit/Debit Card Select one: Visa MasterCard Discover American Express
- Name on Card: _____ Card #: _____
- Signature (card holder): _____ Exp. Date: _____

Please fill out form (print) and mail to:
 Inland Behavioral & Health Services, Inc.
 1963 North 'E' Street, San Bernardino, CA 92405
 ATTN: Golf Committee

Early Registration Deadline: May 15, 2009
Deadline: June 12, 2009



Please Enclose Payment with Registration Form



GOLF PLAYER REGISTRATION

Please Print

PLAYER 1

Player purchased Mulligans.

Name: _____

Email: _____

Phone: _____

Address: _____

City/State/Zip code: _____

Fax: _____

PLAYER 2

Player purchased Mulligans.

Name: _____

Email: _____

Phone: _____

Address: _____

City/State/Zip code: _____

Fax: _____

PLAYER 3

Player purchased Mulligans.

Name: _____

Email: _____

Phone: _____

Address: _____

City/State/Zip code: _____

Fax: _____

PLAYER 4

Player purchased Mulligans.

Name: _____

Email: _____

Phone: _____

Address: _____

City/State/Zip code: _____

Fax: _____

Thank you!!