

FOURSOME REGISTRATION

Foursome cost of \$1000 includes greens fee, golf cart, lunch, reception and awards dinner.

Name: _____
Company: _____
Address: _____
City: _____ State: _____ Zip: _____
Phone: _____ Fax: _____
Email: _____
Class Year: _____

Participant Names:

- 1. _____
Handicap (max. 30) _____
 - 2. _____
Handicap (max. 30) _____
 - 3. _____
Handicap (max. 30) _____
 - 4. _____
Handicap (max. 30) _____
- _____ **Individual Player** \$250

I will not be able to attend but would like to donate \$ _____

Enclosed is a check for \$ _____

Please complete and return with payment to:
Matignon High School
Office of Development
One Matignon Road
Cambridge, MA 02140

I authorize you to charge my credit card:
Visa MasterCard (Circle one)
Account number: _____

Expiration Date _____ Security Code _____
Name on card _____



The Inaugural Matignon High School Scholarship Fund Golf Tournament

*Hosted by the
Board of Trustees*

Monday, September 27, 2010
Andover Country Club
60 Canterbury Street
Andover, MA 01810

Matignon High
School
One Matignon Road
Cambridge, MA
02140



