

WRYM'S 6TH ANNUAL CHARITY GOLF TOURNAMENT

Registration



SUNDAY, SEPTEMBER 7, 2025
Shotgun Start: 1:30 p.m.

ROCHESTER PLACE GOLF CLUB
981 County Rd. 2, Belle River, ON

<i>Name:</i>		<i>Company:</i>			
<i>Street:</i>		<i>City:</i>		<i>Province:</i>	<i>Postal Code:</i>
<i>Phone:</i>		<i>Email:</i>			

Individual Golfer: \$185

- Includes 18 holes of golf with a cart, golfer gift bag, hotdog and a non-alcoholic beverage at the turn, choice of a Chicken and Ribs dinner or Veggie Mexican Bowl dinner, and one chance to play the Closest to the Pin and Longest Drive contests.

Meal: (choice of)

- Chicken and Ribs Dinner:** house salad, penne with marinara sauce, roasted chicken & ribs, herb roasted potatoes, seasonal vegetables, and buns & butter.
- Veggie Mexican Bowl Dinner:** house salad, rice, black beans, guacamole, Pico de Gallo, Cilantro, lime wedge, sour cream chipotle dressing.

Golfer Information:

<i>Name:</i>	
<i>Address:</i>	
<i>Email:</i>	
<i>Phone:</i>	<i>Meal Choice:</i>

<i>Name:</i>	
<i>Address:</i>	
<i>Email:</i>	
<i>Phone:</i>	<i>Meal Choice:</i>

<i>Name:</i>	
<i>Address:</i>	
<i>Email:</i>	
<i>Phone:</i>	<i>Meal Choice:</i>

<i>Name:</i>	
<i>Address:</i>	
<i>Email:</i>	
<i>Phone:</i>	<i>Meal Choice:</i>

Dinner Only Guest: \$70

- Chicken and Ribs Dinner – Quantity: _____ Guest Name(s): _____
- Veggie Mexican Bowl Dinner – Quantity: _____ Guest Name(s): _____
- Dietary Restrictions: _____

Super Ticket: \$20

- Quantity: _____ Golfer Name(s): _____
 - Includes 3 Mulligans & 3 attempts at the Putting Contest. Add the amount to your payment and they will be ready for you at check in.

Donations:

- Prize Donation: _____ Value of Donation: _____
 Name: _____ Contact Information: _____
- I am unable to attend, please accept my donation of: _____.

Photographic Release:

- On behalf of myself and the members of my foursome do hereby grant and convey to WRYM all right, title, and interests in any and all photographs, images, video, or audio recordings of me or my likeness or voice made by WRYM in connection with my participation in WRYM's 6th Annual Charity Golf Tournament.

PAYMENT INFORMATION

<i>Name:</i>		<i>Company:</i>			
<i>Signature:</i>		<i>Date:</i>		<i>Amount:</i>	

Cheque: please make your cheque payable to the **Windsor Residence for Young Men** and mail to the Windsor Residence for Young Men, 1505 Langlois Avenue, Windsor, ON N8X 4M3. Add **GOLF SEP 07** in the memo line. Please include your completed form.

Credit Card: please follow this link <https://www.canadahelps.org/en/dn/129438> to make your payment and email your completed form to golftournament@wrym.ca.

All payments must be received two weeks prior to the tournament.

For more information, please contact Sue at golftournament@wrym.ca or visit www.wrym.ca.