

Tournament Fee: \$150 per person

Entry Fee includes Lunch, Round of Golf
with Cart, and Dinner with Wine

For Additional Information Contact:
Steve Zwick at 707 537-7663
stevezwick@aol.com

Mail entry form with check or
credit card information to:

Santa Rosa Sunrise Rotary Club
c/o Steve Zwick
Post Office Box 14953
Santa Rosa, CA 95402

Please fill out form(s) on reverse side.



Thank you to our Tee Sponsors from last year

Art's Towing
Banner Enterprises
Bouverie Preserve
Brian Rondon, Attorney
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Sunrise Rotary Dental Project

TOURNAMENT BENEFICIARIES Organizations who have received support Include...

Sonoma County Fire Relief
Elsie Allen High School Ag Boosters
Lifeworks of Sonoma County
Local & International Youth Dental Outreach
Steele Lane School Garden
Santa Rosa Senior Center
Youth Grants and Scholarships
Women's Recovery Services
International Eyeglass & Surgery Project
Elsie Allen High School Foundation
The Living Room
Cool Kids Camp
Social Advocates for Youth SAY
Land Paths
SOS - Support Our Students
Santa Rosa/Kagoshima Student Exchange
..... And many more

THANK YOU

To our Corporate Sponsors from last year Kaiser Permanente

Aaron Paving/Stipe'n Seal
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Meridian Consulting
Mill Valley Refuse
RSI Investors LLC
Tweeten Eldercare Advisors

Santa Rosa Sunrise Rotary Club



30th Annual CHARITY GOLF TOURNAMENT

**Thursday, Sept. 26, 2019
Save this Date for Golf!**



OAKMONT GOLF CLUB

**Tournament Fee: \$150 per person
Entry fee includes lunch, range balls,
round of golf with cart, on course
activities, adult beverages and dinner.**

GOLF

Four Person Scramble

Two Flights

1. Low Handicap—Under 15 (foursome average)

2. High Handicap—Over 14 (foursome average)

PRIZES

Registration Gifts

Foursome Awards for flight winners

Longest Drive—Men and Women

Closest to the Pin—Men and Women

COCKTAILS & DINNER

Join us for No-host Cocktails at 5:30 PM

Dinner is served at 6:15 PM

SCHEDULE

11:00AM

Registration Opens

Driving Range Opens

11:15 AM - 12:30 PM

Lunch

12:45 PM

Shotgun Start

5:30 PM

Wine/Beer/Cocktails

6:15 PM

Dinner is Served

PLEASE FILL OUT COMPLETELY TO SPEED UP CHECK-IN

1. Name _____ Telephone _____

Address _____

_____ Zip _____

Email address _____

Signature _____

2. Name _____ Telephone _____

Address _____

_____ Zip _____

Email address _____

Signature _____

3. Name _____ Telephone _____

Address _____

_____ Zip _____

Email address _____

Signature _____

4. Name _____ Telephone _____

Address _____

_____ Zip _____

Email address _____

Signature _____

Two Flights: Choose only one

___ Low Handicap—Under 15 (foursome average)

___ High Handicap—Over 14 (foursome average)

Mail entry with check or credit card information to:

Santa Rosa Sunrise Rotary Club

c/o Steve Zwick

PO Box 14953

Santa Rosa, CA 95402

stevezwick@aol.com

Pay by Check or Credit Card

\$ _____
\$150 per Player

___ Visa

___ Mastercard

___ Amex

Card Number _____

Expiration Date _____ 3digit _____

Name on Card _____

\$ _____
\$150 per Player

___ Visa

___ Mastercard

___ Amex

Card Number _____

Expiration Date _____ 3digit _____

Name on Card _____

\$ _____
\$150 per Player

___ Visa

___ Mastercard

___ Amex

Card Number _____

Expiration Date _____ 3digit _____

Name on Card _____

\$ _____
\$150 per Player

___ Visa

___ Mastercard

___ Amex

Card Number _____

Expiration Date _____ 3digit _____

Name on Card _____

___ Players attending dinner # ___

___ Please arrange foursome

___ Dinner for non-players \$35x#___ = \$_____

Total Amount Enclosed \$ _____

Rotary

