

# The Peoria Area Convention and Visitors Bureau & Heart of Illinois Hospitality Association's 13<sup>TH</sup> Annual 4-Player Golf Scramble

The Peoria Area CVB & Heart of Illinois Hospitality Association's 2009 Annual 4-Player Scramble is designed to be an enjoyable event for players of all skill levels. Teams of four will compete for great prizes and results will be flighted so all have a chance to win.

Thursday,  
**September 3,**  
2009

**12:30 p.m.**  
shotgun start

**Coyote Creek  
Golf Club,**  
Bartonville

## Entry fee:

\$115/Golfer (Before Aug. 1st/ \$125 after Aug. 1st)  
\$150/Hole Sponsorship  
\$460/Foursome  
\$560/Foursome & Hole Sponsorship

## Includes:

Driving Range  
Green Fee  
Cart  
A Delicious Dinner!

Numerous levels of sponsorship are available - from \$150.00 to \$1000. Call (number below) for details!

## ENTRY FORM

(List the players you're requesting to be in your foursome! If you don't have four, we'll match you up!)

Your Name & Company \_\_\_\_\_  
Address \_\_\_\_\_  
City/State/Zip \_\_\_\_\_  
Bus. Phone \_\_\_\_\_ E-mail \_\_\_\_\_

2

Player's Name & Company \_\_\_\_\_  
Address \_\_\_\_\_  
City/State/Zip \_\_\_\_\_  
Bus. Phone \_\_\_\_\_ E-mail \_\_\_\_\_

3

Player's Name & Company \_\_\_\_\_  
Address \_\_\_\_\_  
City/State/Zip \_\_\_\_\_  
Bus. Phone \_\_\_\_\_ E-mail \_\_\_\_\_

4

Player's Name & Company \_\_\_\_\_  
Address \_\_\_\_\_  
City/State/Zip \_\_\_\_\_  
Bus. Phone \_\_\_\_\_ E-mail \_\_\_\_\_

## SPONSOR/ DONOR FORM

- Yes! I Wish To Donate \_\_\_\_\_ As A Prize(s) For  
The 2009 PACVB & HOIHA 4-Player Scramble.
- Yes! I Will Be A Hole Sponsor For The 2009 PACVB & HOIHA  
4-Player Scramble.

Your Name \_\_\_\_\_  
Address \_\_\_\_\_  
City/State/Zip \_\_\_\_\_  
Bus. Phone \_\_\_\_\_ E-mail \_\_\_\_\_

**See you  
at the  
Course!**

Send your completed form to HOIHA, Attn: Andy Bugos, 7150 N. University, Peoria, IL, 61614 Phone (309) 693-9667, ext. 18, Fax (309) 693-3465. Fees must be received with entry form. For a group, all fees must be submitted together. Payment may be made with Mastercard/Visa, or a check payable to the Heart of Illinois Hospitality Association.

Payment Type: Check \_\_\_\_\_ Credit Card \_\_\_\_\_ Total Amount Due: \_\_\_\_\_

Credit Card Type \_\_\_\_\_ MC/VISA \_\_\_\_\_ Expiration Date \_\_\_\_\_ Card Number \_\_\_\_\_

Signature \_\_\_\_\_