



Playing in this tournament saves lives!

This year, the proceeds from our treasured **26th Annual Fairchild Medical Center Foundation Golf Tournament** will go towards the purchase of much needed Personal Protective Equipment for our patients and employees .

As we prepare for the unknown effects of COVID-19 and how the pandemic could affect our hospital. The Foundation wants to help assist **Fairchild Medical Center** with the growing cost of keeping Personal Protective Equipment (PPE) in adequate supply.

This years event will be a bit different as we adjust to a new normal. A goal this year has been to use local businesses for awards and raffle prizes. Please come prepared to partake in new hole contests and a redesigned raffle, since there will not be a live auction this year!

We look forward to hosting and having a fun filled event on **Sunday, September 13, 2020!**

There are many ways to get involved in this year's tournament. If you have questions about becoming a sponsor or a golfer this year, please visit us online at **fairchildmed.org/golf**

Or contact us directly by calling (530) 841-6239 or emailing **canstead@fairchildmed.org**



26th ANNUAL



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Sunday, September 13, 2020

Lake Shastina Golf Resort

7:30am Registration | 8:30am Shotgun Start

REGISTRATION FEES

Entry fees include 18-holes, cart, range balls and lunch.

\$75

ONE PLAYER

\$300

FOUR SOME

First Come First Serve

May have to limit teams due to COVID19

TOURNAMENT FORMAT

Four Person Scramble—Shotgun Start

(Complete rule sheet will be distributed at Tournament)

CONTESTS INCLUDE

Closest to the Pin (Mens, Ladies & Seniors 70)

Longest Drive (Mens, Ladies & Seniors 70)

1st & 2nd Place Teams (Net & Gross)

Plus additional Prize and Contest Holes!

Please Make checks payable to:

FMC Foundation

Please mail your registration form and payment to:

Fairchild Medical Center Foundation
444 Bruce Street, Yreka, CA 96097

Pay w/ Credit Card -send PayPal Invoice

Player Information

Player #1: _____ 70+

Email: _____

Street Address: _____

City: _____ State: _____ Zip: _____

Phone: _____

NCGA/PWGA Index: _____ or _____

Last 3 18-Hole Scores: _____

Dietary Restrictions: Gluten Free Vegetarian Vegan

Player #2: _____ 70+

Email: _____

Street Address: _____

City: _____ State: _____ Zip: _____

Phone: _____

NCGA/PWGA Index: _____ or _____

Last 3 18-Hole Scores: _____

Dietary Restrictions: Gluten Free Vegetarian Vegan

Player #3: _____ 70+

Email: _____

Street Address: _____

City: _____ State: _____ Zip: _____

Phone: _____

NCGA/PWGA Index: _____ or _____

Last 3 18-Hole Scores: _____

Dietary Restrictions: Gluten Free Vegetarian Vegan

Player #4: _____ 70+

Email: _____

Street Address: _____

City: _____ State: _____ Zip: _____

Phone: _____

NCGA/PWGA Index: _____ or _____

Last 3 18-Hole Scores: _____

Dietary Restrictions: Gluten Free Vegetarian Vegan