



Golf Registration Form

2010 APWA International Public Works Congress & Exposition
August 15-18, 2010 | Boston Convention and Exhibition Center | Boston, MA

1 APWA GOLF TOURNAMENT

Deadline: August 4, 2010

WHEN: Wednesday, August 18, 2010; 7:30 am shotgun, Four-Person Scramble

WHERE: Presidents Golf Course, 357 W Squantum St, Quincy, MA 02171 www.presidentsgc.com

Enjoy Beautiful views of Boston at this 18-hole championship course located 15 minutes south of the Boston Convention Center off of I-93 (S.E. Expressway).

ENTRY FEE: \$125/player (includes golf, cart, continental breakfast, buffet lunch, prizes, and transportation)

The format is a four-person, 18-hole scramble. Players who do not sign up as part of a 4-person group will be placed into groups by the committee. Proper golf attire is required, no metal spikes.

HOLE SPONSORS: \$100 Please indicate name to appear on sign : _____

Please complete this form and return with payment to the address below. Photocopy this form as necessary. The first 128 players to return the registration forms with payment will play.

2 RESERVATION INFORMATION

Last Name First Name

Hotel in Boston

Organization

Address

City State

Zip/Postal Code Country

Work Phone Cell Phone

Fax E-mail Address

Emergency Contact

Emergency Contact Phone Number

3 GOLF INFORMATION & WAIVER

Do you need transportation? Yes _____ No _____

(Bus departs from the Boston Convention Center at 6:30 a.m.)

Do you need rental clubs? Yes _____ No _____

(Sets are limited to first 6 to pay and register, \$20)

List all players in your foursome. Have each person list all players on their registration form also.

1. _____ Shirt Size _____

2. _____ Shirt Size _____

3. _____ Shirt Size _____

4. _____ Shirt Size _____

By signature below, I agree to waive all claims and fully relieve the American Public Works Association (APWA), the New England Chapter and all officers, agents, or employees of APWA from liability in connection with my participation in the event outlined above in the event of injury, accident, illness or death occurring during or by reason of my participation in this event so long as due diligence is exercised.

Signature

Date

4 PAYMENT INFORMATION

TOTAL ENCLOSED: \$ _____

MAKE CHECKS PAYABLE TO:
New England Chapter APWA

MAIL TO: 404 Woodland Road
Storrs, CT 06268

QUESTIONS: Bob Goober
978-532-1900
Gooberr@wseinc.com