



CURE FUND
STRENGTH FOR TODAY
HOPE FOR TOMORROW

Registration Form

MS Cure Fund Golf Classic
Monday, 9/20/2010 - Hyannisport Club



SPONSORSHIP INFORMATION

| Event: | Presenting:
 | Host: | Corporate:
 | Other: | Hole sponsor:
 | Name: | Corporation:
 | Address | City | State: | Zip:.....
 | Contact phone number: | E-mail:

PAYMENT INFORMATION

Payment Registration Form due September 6th, 2010 Foursome Number:.....(internal use only)

| Payment type: MC AMEX VISA Check (see below)
 | Name (as it appears on the card):
 | Credit Card Number: | Expiration Date:
 | Billing Address:
 | Billing City: | Billing State: | Billing Zip:

Checks Payable to MS Cure Fund

Mail to : 22 Dickson Lane, Weston, MA 02493, Office Number: 617-375-9900, FAX:617-375-9909,

PLAYER INFORMATION

| Player #1

| Name: | E-mail:
 | Address: | City: | State: | Zip:
 | Handicap: | Index: | Shirt Size:

| Player #2

| Name: | E-mail:
 | Address: | City: | State: | Zip:
 | Handicap: | Index: | Shirt Size:

| Player #3

| Name: | E-mail:
 | Address: | City: | State: | Zip:
 | Handicap: | Index: | Shirt Size:

| Player #4

| Name: | E-mail:
 | Address: | City: | State: | Zip:
 | Handicap: | Index: | Shirt Size: