

**4th Annual Pede Fall Classic  
Benefiting the Delaware Prostate Cancer Coalition**



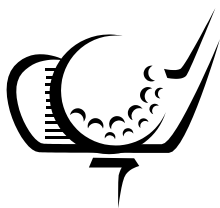
**Join us for a great day of golf at the Fieldstone Golf Club**

**When:** Monday September 29<sup>th</sup> 2014  
Shotgun start at 12:30pm  
Dinner to follow

**Where:** Fieldstone Golf Club  
1000 Dean Road Greenville, DE 19807

**Cost:** \$225 (Golf and Dinner)  
\$100 (Dinner only)

**RSVP:** Please return the attached sheet  
And payment by **August 11th, 2014**



**Hole Sponsorship** is your opportunity to support the Delaware Prostate Cancer Coalition. You can sponsor a hole for \$500.

# 4<sup>th</sup> Annual Pedo Fall Classic Benefiting Delaware Prostate Cancer Coalition

## Entry Form

Golfer Name: \_\_\_\_\_

Address: \_\_\_\_\_

*Street*

*City*

*State*

*Zip*

Phone: (     )

E-mail: \_\_\_\_\_

Please check  
one:

Foursome

Threesome

Twosome

Single

\*\*\*Your group will stay together\*\*\*

Golfers in your group

Golfer #2 \_\_\_\_\_

Golfer #3 \_\_\_\_\_

Golfer #4 \_\_\_\_\_

Total number of golfers: \_\_\_\_\_ X \$225.00 = \$ \_\_\_\_\_

Total number dinner only \_\_\_\_\_ X \$100.00 = \$ \_\_\_\_\_

Separate Donation \_\_\_\_\_ = \$ \_\_\_\_\_

Number of Hole Sponsors\* \_\_\_\_\_ X \$500.00 = \$ \_\_\_\_\_

**TOTAL ENCLOSED:**

\$ \_\_\_\_\_

Please make checks payable to: **Delaware Dental Foundation/Pedo**

\*Name to Appear on Hole Sponsor Sign (Please print): \_\_\_\_\_

Please complete and return this registration form and payment by **August 14<sup>th</sup> 2014**

**Send registration form  
and check to:**

D. Michael Gioffre Jr.  
1708 Lovering Avenue, Suite 102  
Wilmington, DE 19806

