



# 4TH ANNUAL ORPHAN HELPERS GOLF CLASSIC

**JUNE 25, 2010**

FORD'S COLONY  
WILLIAMSBURG, VIRGINIA

1:00 PM SHOTGUN START

FOUR-MAN  
CAPTAIN'S CHOICE

**\$125 PER PLAYER**

**FEE INCLUDES:**

- GREENS FEE
- RANGE BALLS
- CART
- ON-COURSE BEVERAGES
- BOX LUNCH
- DINNER
- PRIZES
- GOODY BAG
- CARS FOR HOLE-IN-ONE

**GOLD SPONSORS:**

AMERICAN MARITIME  
HOLDINGS  
ATLANTIC BAY MORTGAGE

**GIVING  
ORPHANS  
LIFE WITH A  
FUTURE**



## INDIVIDUAL TEAMS—REGISTRATION FORM

Yes, I am interested in forming an individual team for this year's Golf Classic.

*NOTE: ORPHAN HELPERS is a 501(c)(3) tax-exempt, charitable organization*

### ENTRY FEES\* (SELECT ONE):

- \$125 per individual golfer
- \$500 per team (one foursome)

*\* Fee includes: Green fees, cart, range balls, on-course beverages, lunch, dinner, prizes & goody bag*

### Individual Team Member Benefits:

- An opportunity to play at Ford's Colony, an exclusive and private golf course
- Outstanding Raffle Prizes and Live Auction opportunities
- Prizes for closest to the pin, longest drive, cars for hole-in-one
- Trophies for First, Second and Third place winners in each flight
- Fellowship

#### Player 1 (Captain)

Name:
Address:
City/State/Zip:
Home Ph:
Cell Ph:
Approx. Handicap:
<input type="checkbox"/> Check <input type="checkbox"/> Credit Card VISA — MC — Discover — AMEX (circle one)
Card No.
Expiration Date: ____/____/____

#### Player 2

Name:
Address:
City/State/Zip:
Home Ph:
Cell Ph:
Approx. Handicap:
<input type="checkbox"/> Check <input type="checkbox"/> Credit Card VISA — MC — Discover — AMEX (circle one)
Card No.
Expiration Date: ____/____/____

#### Player 3

Name:
Address:
City/State/Zip:
Home Ph:
Cell Ph:
Approx. Handicap:
<input type="checkbox"/> Check <input type="checkbox"/> Credit Card VISA — MC — Discover — AMEX (circle one)
Card No.
Expiration Date: ____/____/____

#### Player 4

Name:
Address:
City/State/Zip:
Home Ph:
Cell Ph:
Approx. Handicap:
<input type="checkbox"/> Check <input type="checkbox"/> Credit Card VISA — MC — Discover — AMEX (circle one)
Card No.
Expiration Date: ____/____/____

**Submit Form To:**

**Orphan Helpers**

**813 Forrest Drive, Suite A • Newport News, VA 23606**

**(757) 722-6940 • Facsimile: (757) 722-6942**