

## May 2018

Thank you for your consideration in taking part in the Toledo Estate Planning Council's 27<sup>th</sup> Annual Golf Outing, which will be held on Friday, June 29, 2018 at Stone Oak Country Club.

A portion of the proceeds from the event are used towards endowment of the TEPC Scholarship Fund. Your company can support TEPC with one of the following ways:

- Hole Sponsor \$125
  - One lawn sign at a tee or green on the course (text only)
- Join us for Golf! \$100 per player, any number of golfers welcome!
- Don't golf? You can join us for lunch!

Please fill out the bottom portion of this form exactly how you would like your name to appear on the signage, and send this form in with your payment.

Lastly, if you have not already, please join us for the event by filling out the event sign-up form. We welcome foursomes as well as individual golfers. If you are not a golfer, you can still join us for lunch – details are all on the additional information sheet.

## Thank you for your support!

Sincerely,

Andrew Wettle, TEPC Golf Chairperson Plante Moran Andrew.Wettle@plantemoran.com 419.842.6179

Hole Sponsor:

Print sponsor name as it should appear on tee sign

Thank you to our Golf Headline Sponsor....



## **REGISTRATION FORM** TEPC Golf Outing, Friday June 29, 2018 – Shotgun Start 8:30 am

Please complete the registration form and return it with your check or credit card information filled out below.

Registration deadline is **Tuesday**, **June 26**, **2018**. Registration is open to all – if you do not have a foursome, you will be matched up.

## MEMBERS AND GUESTS: \$100.00 per person (includes continental breakfast and hot lunch)

| Name:   |           |                  |  | Company:    |                          |            |                  |
|---|-----------|------------------|--|-------------|--------------------------|------------|------------------|
| Phone:  |           |                  |  | Email:      |                          | I          | Handicap:        |
| TEPC:   | □ Member  | r □ Guest        |  |             |                          |            |                  |
| Name:   |           |                  |  | Company:    |                          |            |                  |
| Phone:  |           |                  |  | Email:      |                          | I          | Handicap:        |
| TEPC:   | □ Membe   | r □ Guest        |  |             |                          |            |                  |
| Name:   |           |                  |  | Company:    |                          |            |                  |
| Phone:  |           |                  |  | Email:      |                          | I          | Handicap:        |
| TEPC:   | □ Member  | r □ Guest        |  |             |                          |            |                  |
| Name:   |           |                  |  | Company:    |                          |            |                  |
| Phone:  |           |                  |  | Email:      |                          | I          | Handicap:        |
| TEPC:   | □ Member  | r □ Guest        |  |             |                          |            |                  |
| LUNCH   | ONLY:     | \$15.00 per pe   | erson, Immediate                       | ly followin | g golf (around 1:00      | pm)        |                  |
| Name:   |           |                  |  | Company:    |                          |            |                  |
| Phone:  |           |                  |  | Email:      |                          |            |                  |
| TEPC:   | □ Member  | r 🛛 Guest        |  |             |                          |            |                  |
| Please r  | nake chec | ks payable to: 1 | TEPC                                   |             | Credit Card: DVisa       | MasterCard | American Express |
| Mail registrations and payment to: The Association Office |           |                  |  |             | Name on card:            |            |                  |
|   |           |                  | Attn: Abbey Riley<br>7517 Wind River D |             | Card Number:             |            |                  |
|   |           |                  | Sylvania, Ohio 438                     | 560         | Expiration Date:         | CVV:       |                  |
|   |           |                  |  |             | Billing Zip Code:        | Authorize  | d Amount:        |
|   |           |                  |  |             | Signature:               |            |                  |
|   |           |                  |  |             | Email address for receip | pt:        |                  |