



**FHF Use Only:**

Team #

Cart #

353 Old Post Rd, Rhinebeck, NY 12572 – 845-876-7711

**Team Registration Form**

**18th Annual “Friends Helping Friends” Event**

**Saturday - Sept 20th - Golf Tournament at Dinsmore Golf Course, Rt. 9**

**Please make checks payable to Rhinebeck KIDS’ Benefit Inc.**

Dear Friends,

Please consider this your invitation to play in our 18th Annual Event. Golf registration and breakfast is at 8AM with a shotgun start at 9AM at Dinsmore Golf Course (Rain or Shine). Best Ball Scramble-4 person/ **\$150 per person** - includes 18 Holes with cart. Also includes breakfast and lunch at golf course, dinner, and entertainment, raffle prizes with a 50/50 to follow at CJ’s Restaurant. Dinner will include a buffet with Prime Rib, London Broil, Chicken, Baked Ziti and more...

A payment of **\$600** reserves your foursome. This year we have a limited number of golfers on a first come first served basis. Please include a Shirt Size for each player. Make out a check payable to **Rhinebeck KIDS’ Benefit Inc.** and mail to Karen Peluso c/o of FHF, 218 Mill Road, Red Hook, N.Y., 12571.

Team Captain: 1.) \_\_\_\_\_ Shirt Size (S,M, L, XL, XXL) \_\_\_\_\_ Phone # \_\_\_\_\_  
Crew: 2.) \_\_\_\_\_ Shirt Size (S,M, L, XL, XXL) \_\_\_\_\_  
3.) \_\_\_\_\_ Shirt Size (S,M, L, XL, XXL) \_\_\_\_\_  
4.) \_\_\_\_\_ Shirt Size (S, M, L, XL,XXL) \_\_\_\_\_

**Waiver of Liability:** In consideration of my entry, I, my heirs, executors and administrators waive all claims, release from all liability, and agree to hold harmless, CJ’s, its agents, members and sponsors of this event for any and all injuries and damages suffered by me in conjunction with this event. I understand that this tournament entails personal risk, including serious bodily injury and even death, and I voluntarily assume that risk. I recognize the physical exertion involved in the event and attest and certify that I am physically fit to compete safely, and I have not been advised otherwise by a health care professional.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_  
Signature: \_\_\_\_\_ Date: \_\_\_\_\_  
Signature: \_\_\_\_\_ Date: \_\_\_\_\_  
Signature: \_\_\_\_\_ Date: \_\_\_\_\_

For registration or info please Call: Karen at 845-546-6532

Sincerely,

William Abela