



# 3<sup>rd</sup> Annual Golf Tournament

*Benefitting the American Heart Association*

Sponsored by



*getting involved in the local community*



*providing principle centered service*

and

Town North Associates, Ltd.

*family owned & operated for 50 years*



## Tierra Verde Golf Club

7005 Golf Club Dr  
Arlington, TX 76001

Friday, Oct 5, 2012  
12:00 pm Registration  
1:30 pm Shotgun Start  
\$80 Per Player / \$320 Per Team



Price includes green fees, cart, range balls, registration/goodie bag, buffet dinner, chance for prizes, and live music featuring the Silver Rail Band beginning at 6:30 pm.

For more information and registration form, visit [www.ArlingtonGolf.com](http://www.ArlingtonGolf.com) and view the "Happenings" section.

*Deadline for registration and payment is October 1.*





## American Heart Association Golf Tournament Registration Form

Join us at a truly spectacular golf course and help the City of Arlington raise donations for research and programs to help fight heart diseases.

Date: Friday, Oct. 5, 2012

Place: Tierra Verde Golf Club, 7005 Golf Club Dr, Arlington, TX 76001

Registration: Completed form and payment must be received by Monday, Oct. 1, 2012

Starting Times: Registration 12:00 p.m.  
 Shotgun Start 1:30 p.m.  
 Dinner & Live Music 6:30 p.m.

Entry Fee: \$80 per player  
 \$320 per foursome

Includes: Green fees, cart, range balls, registration bag, buffet dinner, opportunity for prizes, free chair massage, and live music featuring the Silver Rail Band.

Format: Scramble

Handicap: Provide your handicap or approximate score for eighteen holes

Name: \_\_\_\_\_ Handicap: \_\_\_\_\_

Phone: \_\_\_\_\_

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

[ ] Individual Registration \$80.00

[ ] Group Registration \$80.00 X \_\_\_\_\_ = \$ \_\_\_\_\_

List the additional members of your group below (maximum of 4 including yourself).

**Player #2** \_\_\_\_\_ Handicap: \_\_\_\_\_

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

**Player #3** \_\_\_\_\_ Handicap: \_\_\_\_\_

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

**Player #4** \_\_\_\_\_ Handicap: \_\_\_\_\_

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

**RETURN THIS COMPLETED FORM WITH CHECK MADE PAYABLE TO THE CITY OF ARLINGTON TO:**

Housing Authority of the City of Arlington  
 Attention - Michele Craven  
 501 W. Sanford Street, Suite 20, Arlington, TX 76011

Questions? Email [Michele.craven@arlingtontx.gov](mailto:Michele.craven@arlingtontx.gov) or call 817-276-6730.

**DEADLINE**  
**Monday, Oct. 1**