

**CALL NOW & REGISTER  
TODAY**

**Call 732-981-8901**

Please Return this form by May 10, 2010



Established in memory of Albert G.

Hoesley Jr. This charity event

benefits the

Daryl Pease King Phillip Mini

Scholarship Fund.

**THANK YOU FOR YOUR**

**SUPPORT!**

*Everyone is welcome!  
Come and enjoy the day!*

Piscataway, NJ 08550

255 Old New Brunswick Road Ste 360S

**NJCECA**

**ALBERT G.  
HOESLEY JR.**

Memorial  
Golf Open

**Eagle Ridge Golf Club**



**Tuesday, May 18, 2010**

**REGISTRATION @ 10:30 AM**

**Tee-Off @ 1:30 PM**



## NJECA Presents

The NJECA Scholarship Golf Open is a great way for you and your associates, clients and friends to enjoy a glorious day of golf, fun and sportsmanship.

Start putting your foursome together now! Once on the course, your score will be posted, tabulated and a list of winning places prepared, using your handicap or the Calloway system. Longest drive, closest to the pin, and best teams score contests, along with our putting contest will provide interesting additions to the main tournament activity.

**Golf Plan: \$195.00 per person**– Includes registration, green fees, electric cart, locker room, scorer, lunch, dinner and prizes.

### Remember this is for charity!

**Great Games:** Closest to Pin, Longest hole drive, Putting contest and much more!

## Schedule:

**10:30 AM-** Registration

**12:00 PM-** Lunch– Mouth watering hamburgers, barbequed chicken, sweet Italian Sausage with pepper and onions, corn on the cob and baked beans, Red bliss potato salad

**1:00 PM**– Let the games begin!

**6:00 PM**– Cash bar/Hors D' Oeuvres–

**6:45 PM**-Ballroom/Dinner Buffet

Carved Sirloin of Beef served with silver dollar rolls, Chicken Francaise, Vodka Rigatoni with Sausage and dessert.

### Sponsorships

Green	\$100.00
Tee	\$100.00
Luncheon Sponsor	\$750.00
Putting Contest	\$250.00
Dinner Sponsor	\$1500.00
Dinner Only	\$100.00

## Registration Form

Foursome info:

Name of Player: \_\_\_\_\_

2. \_\_\_\_\_

3. \_\_\_\_\_

4. \_\_\_\_\_

Please print all information:

Name \_\_\_\_\_

Phone Number \_\_\_\_\_

Method Of Payment:

Card# \_\_\_\_\_

Exp Date

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

**Or mail check with this form to : NJECA  
255 Old New Brunswick Road Ste 360s  
Piscataway, NJ 08854**

