



Swing to Cure Diabetes **GOLF OUTING**

May 17, 2010
University of Michigan Golf Course

REGISTRATION FORM

Please complete the information below and return no later than **May 1, 2010** to:

Rich Hewlett
Dawda, Mann, Mulcahy & Sadler, PLC
39533 Woodward Ave., Suite 200
Bloomfield Hills, MI 48304

OR FAX to: **(248) 642-7791**
ATTN: Rich Hewlett

EMAIL: rhewlett@dmms.com

For additional information, call:
(248) 642-8439

Payment Information

of Golfers @ \$250 each _____

My check is enclosed for \$ _____
(Payable to "Swing to Cure Diabetes")

Please charge \$ _____ to Visa / MC

Expiration date ____/____/____

V# _____ (security code from back of card)

Signature of cardholder

Please contact me regarding sponsorship
opportunities or prize donations

Golfer Information

Name _____

Co/Org _____

Address _____

City/State/Zip _____

Phone _____ Email _____

Shirt size: S ___ M ___ L ___ XL ___ XXL ___

Name _____

Co/Org _____

Address _____

Phone _____ Email _____

Shirt size: S ___ M ___ L ___ XL ___ XXL ___

Name _____

Co/Org _____

Address _____

City/State/Zip _____

Phone _____ Email _____

Shirt size: S ___ M ___ L ___ XL ___ XXL ___

Name _____

Co/Org _____

Address _____

City/State/Zip _____

Phone _____ Email _____

Shirt size: S ___ M ___ L ___ XL ___ XXL ___

*Four golfers will automatically be a team. We will create teams
with those who have fewer than four golfers.*



dedicated to finding a cure

