



***“Pretty In Pink” Charity Golf Tournament
Thursday, May 10, 2018
Devils Ridge Golf Club, Holly Springs, NC***

The Devils Ridge Ladies Golf Association invites you to join us in a fun day of golf at Devils Ridge Golf Club. We are holding our annual charity golf tournament to raise funds supporting the Pretty In Pink Foundation, (www.prettyinpinkfoundation.org), a local charity that assists individuals who cannot afford their breast cancer treatment.

The golf format will be an 18-hole “Pink Lady” Scramble.

Registration from 7:45-8:30 am with a shotgun start at 9:00 am. Please check in early to allow time for the continental breakfast, mulligans, auction items and raffle.

This tournament is open to men and women, members and guests.

Registration fee of \$110 entitles each participant to:

- 18 holes of golf, range balls and a special Tee Gift.
- Cart-fee-only certificate, valid for 4 players at **Devils Ridge, Lochmere and The Neuse**
- Continental breakfast, refreshments on the course, and lunch after golf
- Prizes for low team scores and skill shot contests at designated holes

Wear pink and join us in our effort to provide treatment to breast cancer patients.

In case of inclement weather, lunch will be served at 12 noon, May 10.

For directions call Devils Ridge at 919-557-6101.

“Pretty In Pink” Golf Tournament Registration Form

#1	Name:	**HCP INDEX
	Phone:	
	Email:	

Please check if you are a breast cancer survivor: _____ yes

Make checks payable to **ClubCorpCharities** in the amount of **\$120** per player and mail to:

Eryn Davis, 4916 Sun Lake Court, Holly Springs, NC 27540

571-477-5149 cnedavis@yahoo.com

(Or leave form with staff at pro shop along with your check)

* If you are playing in a foursome, list names, index & if a cancer survivor*

#2	Name	**HCP INDEX	Survivor
	Phone		
#3	Name		
	Phone		
#4	Name		
	Phone		

18 HOLE HANDICAP INDEX is required for **non-members only**

** Member’s handicap index will be provided by Devils Ridge pro shop**

Full Payment must accompany Registration Form

Form Number _____

Date Received _____

Time Received _____