

GOLFER REGISTRATION FORM

5TH ANNUAL SWING 4 JAMES GOLF TOURNAMENT

In support of the New Haven Learning Centre



Thursday, August 21, 2025

Lionhead Golf Club 8525 Mississauga Rd, Brampton, ON L6Y 0C1

CONTACT INFORMATION

Company Name: _____

Contact Person: _____

Email: _____ Phone: _____

GREEN FEES

Registration Information

Individual Registration: \$350 x _____ = \$ _____

Foursome Registration: \$1,400 x _____ = \$ _____

Lunch Reception Only: \$185 x _____ = \$ _____

Total \$ _____

Participant #1	Participant #2
Name: _____	Name: _____
Email: _____	Email: _____
Participant #3	Participant #4
Name: _____	Name: _____
Email: _____	Email: _____

Menu Choices - Please indicate quantity (vegetarian options available)

Breakfast X _____	Mid Round Hot Dogs X _____	Lunch X _____
-------------------	----------------------------	---------------

Methods of Payment

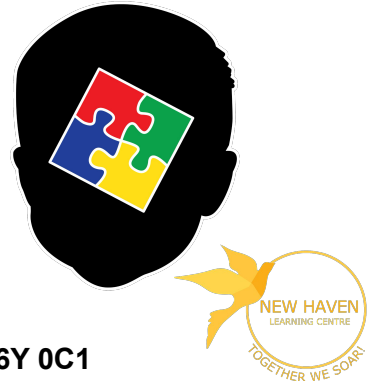
1. **Cheque:** Please make payable to "Georgina & Jonathan Rovira" and mail to 24 Silverthorne Bush Drive, Etobicoke, ON M9C 2X5
2. **Credit Card:** Can be made directly from the link/QR Code found on the invoice sent via email.
3. **E-transfer:** Send to info@voice4james.com If password is needed, please use "James".

Please email this completed form to info@voice4james.com to be invoiced.
If you have any questions, please contact Gina Rovira at gina@voice4james.com.

SPONSOR REGISTRATION FORM

5TH ANNUAL SWING 4 JAMES GOLF TOURNAMENT

In support of the New Haven Learning Centre



Thursday, August 21, 2025

Lionhead Golf Club 8525 Mississauga Rd, Brampton, ON L6Y 0C1

CONTACT INFORMATION

Company Name: _____

Contact Person: _____

Email: _____ Phone: _____

SPONSORSHIPS

Sponsorship Registration Information

Hole Sponsorship: \$500 x _____ = \$ _____

Corporate Sponsorship: _____ \$ _____ x _____ = \$ _____

Total \$ _____

Participant #1	Participant #2
Name: _____	Name: _____
Email: _____	Email: _____
Participant #3	Participant #4
Name: _____	Name: _____
Email: _____	Email: _____

Menu Choices - Please indicate quantity (vegetarian options available)

Breakfast X _____	Mid Round Hot Dogs X _____	Lunch X _____
-------------------	----------------------------	---------------

Methods of Payment

1. **Cheque:** Please make payable to "Georgina & Jonathan Rovira" and mail to 24 Silverthorne Bush Drive, Etobicoke, ON M9C 2X5
2. **Credit Card:** Can be made directly from the link/QR Code found on the invoice sent via email.
3. **E-transfer:** Send to info@voice4james.com If password is needed, please use "James".

Please email this completed form to info@voice4james.com to be invoiced. If you have any questions, please contact Gina Rovira at gina@voice4james.com.