



# 5th Annual IHLA Open



## Friday, April 22, 2016

**\*\*\*NEW LOCATION\*\*\* Otter Creek Golf Course  
11522 E. 50 N., Columbus, IN 47203**

Registration at 8 a.m. w/ coffee & donuts · Shotgun Start at 9 a.m. with awards banquet to follow  
\$119 per person or \$475 per team (Includes green fees, cart, drinks on the course, and lunch)  
· Scramble Format · Contact Kevin Mershimer 724-699-4550 if you need help with a team

### HIGHLIGHTS

- \$2500 Putting Contest & \$10,000 Hole-In-One Contest Sponsored by U-C Coatings!
- Everyone will go home a winner!

### Registration - Team or Individual

Name	Company
1. _____	_____
2. _____	_____
3. _____	_____
4. _____	_____

### Sponsorship

Sponsorship entitles you to recognition in the onsite tournament program, the IHLA newsletter & signage at the outing.

- |                                             |                                                                                              |
|---------------------------------------------|----------------------------------------------------------------------------------------------|
| _____ Grand Prize Sponsor For \$1000        | _____ Hole Sponsor for \$250                                                                 |
| _____ Food & Beverage Sponsor for \$500     | _____ Door Prize Donor (Items or Cash)                                                       |
| _____ Closest to the Pin Sponsor for \$250  | _____ <b>Tee Box Sponsor for \$200 (must be present at the event) **Golfers' Favorite!!!</b> |
| _____ Longest Drive Prize Sponsor for \$250 |                                                                                              |
| _____ Longest Putt Sponsor for \$250        |                                                                                              |

\_\_\_\_\_ Name of person(s) attending

### Contact Information

Contact Name/Team Captain: \_\_\_\_\_ Company Name: \_\_\_\_\_

Address: \_\_\_\_\_ City/State/Zip: \_\_\_\_\_

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

Cell Phone: (in case of weather related delays, etc.) \_\_\_\_\_ Fax: \_\_\_\_\_

### Payment Information

\_\_\_\_\_ Check Enclosed in the amount of \$ \_\_\_\_\_ (or) bill my Visa/MC/Discover/AMEX

Card # \_\_\_\_\_ Exp. Date \_\_\_\_\_

Name on Card \_\_\_\_\_ Signature \_\_\_\_\_

*Mail this entry form and payment to:  
IHLA, 1849 Broad Ripple Avenue  
Indianapolis, IN 46220 or  
fax to (317) 875-3661 Questions? Call the IHLA office at (317) 875-3660*