

NC Fire & Rescue Instructors Conference

Broadmoor Golf Links

101 French Broad Lane
Fletcher, NC 28732
Phone: 1-866-578-5847

Wednesday May 6, 2009
Cost: \$50 per player
Late Registration 11:00 AM
Shotgun Start 12:00 PM

Enjoy 18 holes of golf (including cart), prizes, closet to the pin prizes and an exciting awards banquet after the round.....

After round contests will include:

- Putting contest on the practice green
- Long drive contest

Questions?

Contact:
Mitch Sellars
Skyland Fire & Rescue
828-400-2814

2009 13th Annual Golf Tournament

Sponsored by:

NC Society of Fire and Rescue Instructors
NC Department of Insurance Office of State Fire Marshal



This year's event will be held Wednesday May 6th, 2009 at the well-manicured Broadmoor Golf Links located in Fletcher, NC. Format for the tournament will be 4 man scramble.

Tournament will begin with a shotgun start at 12 pm. Late registration will begin at 11am.

The cost for this event is only \$50. This price includes 18 holes of golf, riding cart, drinks, snacks and various prizes.

Proceeds from this year's tournament will help support the Gene Gladin Scholarship Fund that has been established by the Western North Carolina Firefighters Association.

There will be an awards presentation and social immediately following the tournament at the Crown Plaza resort.

Proper golf attire is required. No steel spikes are allowed on the course.

To help us properly plan for this event, please pre-register by completing the attached player information sheet and return by April 27th to:

Skyland Fire & Rescue
NCFRIC Golf Tournament
Attention: Mitch Sellars
PO Box 640
Skyland, NC 28776

* PLEASE MAKE CHECKS PAYABLE TO NCSFRI *

PLAYER NAME _____

DEPARTMENT OR AGENCY _____

USGA HANDICAP OR AVERAGE SCORE _____

CONTACT INFORMATION _____

PLAYER NAME _____

DEPARTMENT OR AGENCY _____

USGA HANDICAP OR AVERAGE SCORE _____

CONTACT INFORMATION _____

PLAYER NAME _____

DEPARTMENT OR AGENCY _____

USGA HANDICAP OR AVERAGE SCORE _____

CONTACT INFORMATION _____

PLAYER NAME _____

DEPARTMENT OR AGENCY _____

USGA HANDICAP OR AVERAGE SCORE _____

CONTACT INFORMATION _____