

Monday, September 24, 2012
Northview Golf & Country Club, Canal Course



GI SOCIETY GUEST/DRIVER REGISTRATION FORM

Players must raise at least **\$800** to bring a guest and/or power cart driver to the event.

PLAYER'S NAME

DR, MR, MRS, MS

FIRST NAME

LAST NAME

ADDRESS

CITY

PROVINCE

POSTAL CODE

PHONE

FAX

EMAIL

Waiver/Release

By participating in this Golf Marathon, I waive and release any and all claims for myself, my heirs, executors and administrators against all sponsors, officials, and organizers of this event, the Gastrointestinal Society, their sponsors and their properties, directors, officers, and employees, for injury, illness, death, misadventure, harm, loss, inconvenience, or damage which may directly or indirectly result from my participation in this event. I am physically able to participate in this event. I have read, understand and agree with the contents of this waiver/release prior to participating in this event.

I AGREE TO THE ABOVE TERMS AND CONDITIONS.

DATE

SIGNATURE (IF MAILING OR FAXING BACK)

DATE

If using a desktop email application such as Microsoft Outlook, Eudora, or mail, please make sure the program is open before pressing the submit form button.

Guest/Power Cart Driver

Email golf@badgut.org
Fax 604-875-4429
Phone 604-875-4875

Gastrointestinal Society
855 West 12th Avenue
Vancouver, BC V5Z 1M9

