

# GOLF TOURNAMENT



## Elks Country Club

1800 South Marymount Road  
Salina, Kansas 67401  
Pro Shop: 785-827-8585

Wednesday, April 21, 2010  
Cost: \$90 per team

Enjoy a complete program of special events, 18 holes of golf (including cart), and lunch.

**All for just \$90 / team**

### Prizes Awarded For:

- Longest drive
- Closest to the pin
- Longest putt

**Please RSVP BY:  
April 2, 2010**

**\*\* Late Entry Fees will be accepted on the date of the tournament with an entry fee of \$ 100.00 / Team.**

Make Checks Payable To:  
**Salina Fire Fighters Trust Fund.**

## Kansas State Firefighters Association - 2 Man Scramble



*Elks Country Club*



This year's event will be held **Wednesday, April 21<sup>st</sup>** at the Elks Country Club in Salina, Kansas

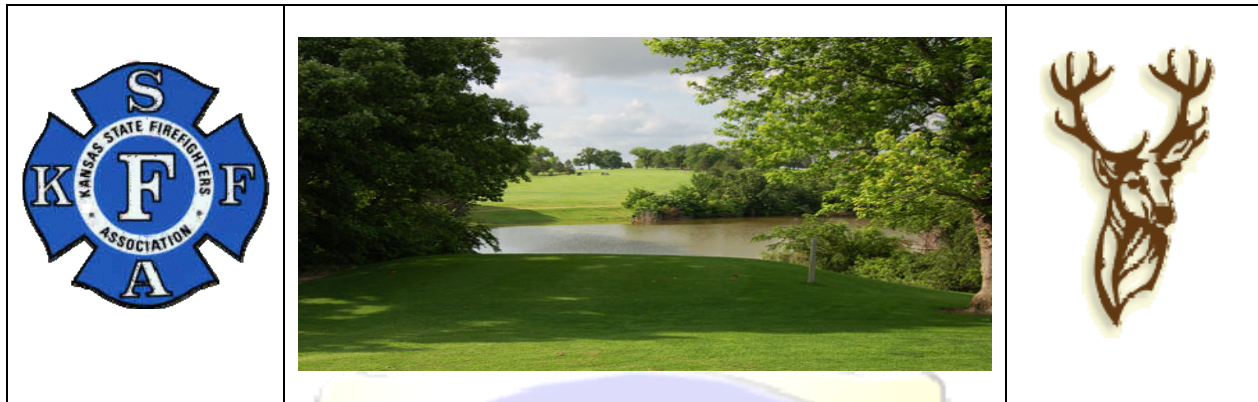
Registration begins at 8:00 a.m., with a shotgun start at 9:00 a.m.

The cost for this event is only **\$90.00 per team**. This price includes entry into 18 holes of golf, riding cart and lunch.

*Collared shirts are required. No steel spikes are allowed on the course.*



# Kansas State Firefighters Association - 2 Man Scramble



January 2010

Re: **2010 KSFFA CONFERENCE GOLF TOURNAMENT – Registration Confirmation**

Dear Team,

We are asking for your registration information and \$90.00 tournament fee as early as possible, I know everyone is being hit rather hard with the recent turn in our economy. I would personally like to thank all of you for your continued participation and support of the annual conference, and we hope to make this year's event a memorable time for all.

Please RSVP BY: April 2, 2010

**\*\* Late Entry Fees will be accepted on the date of the tournament with an entry fee of \$ 100.00 / Team.**

**Please make checks payable to: Salina Fire Fighters Trust Fund**

Thank you again for your participation and support!

Sincerely,

A handwritten signature in blue ink that reads "Roger D. Williams".

Roger Williams  
Tournament Coordinator

Name: \_\_\_\_\_

Department: \_\_\_\_\_

Phone #: \_\_\_\_\_

Name: \_\_\_\_\_

Department: \_\_\_\_\_

Phone #: \_\_\_\_\_