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THE LEONARD AND MARJORIE
WILLIAMS FAMILY FOUNDATION
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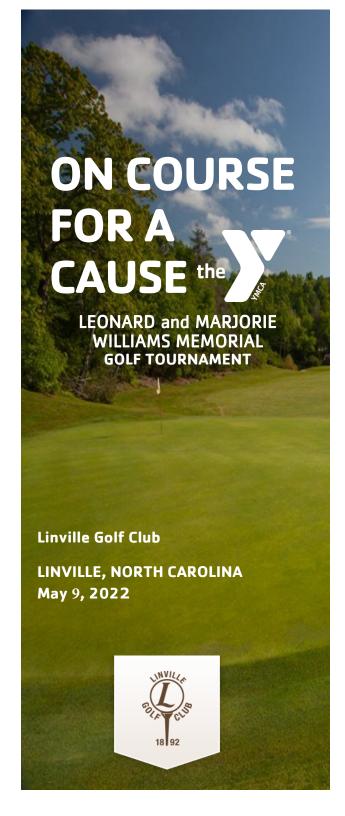




WILLIAMS YMCA OF AVERY COUNTY

PO BOX 707 LINVILLE, NC, 28646 Trey Oakley, CEO 828-737-5500

828-737-5504 FAX



TOURNAMENT INFORMATION

The entry fee for the tournament is \$200 per player-The entry fee includes lunch, favors, cart fees, practice balls, drinks, mulligans and an awards social immediately following the tournament.

SCHEDULE FOR MAY 9th

- 11:00 Range Opens/ Registration
- ◆ 11:30am: Lunch
- 1:00pm: Shotgun Start
- ♦ 6:00pm: Awards & Cocktail Reception

TOURNAMENT FORMAT

The format is Texas Scramble (or Shamble). Each team member drives from the Tee at each Hole. The best drive for the team is chosen and each team member plays their ball for that point forward. The best ball from each team will be used and prizes will be awarded for the top gross scores and the top net scores with USGA handicaps used to determine the net score.

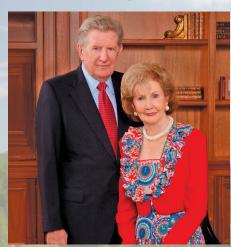
MULLIGANS

A maximum of one Mulligan per golfer and is included in entry fee.

PRIZES

Prizes will be awarded to the 1st, 2nd, and 3rd place net winners, 1st place gross winners, and on-course challenge winners.

Leonard and Marjorie Williams



We are proud to continue growing Leonard and Marjorie's legacy and the impact that they have had and will continue to have on those in our community. While they are no longer with us physically, they will live on through not only our YMCA but the countless other organizations that they have supported to ensure that children and other vulnerable populations are receiving the services they deserve. Our community owes them a great deal of gratitude. The purpose of our golf tournmaent is not only to honor and remember them, but to continue the Williams' impact by raising funds for scholarships for children and families in need.

Marjorie Horn Williams 05/27/31-09/15/15 Leonard Eugene Williams 11/22/30-01/23/21

MENU PROVIDED BY STONEWALLS

REGISTRATION INFORMATION

FOURSOME (\$800)

	SINGLE GOLFER (\$200, we will pair you)
	MULLIGANS (1 per player included)
	Player 1HCP Player 2HCP
ŝ	Player 3HCP
ì	Player 4HCP
STATE	Charge \$ to my:MasterCardVISADiscAMEX
	Name of Cardholder:
ı	Card Number:Expiration:/ CVV#:
ı	
ı	Address:
ı	
ı	FAX: 828-737-5504
	Please write check(s) payable to: Williams YMCA OF Avery County Total Amount of Enclosed Check(s):
	\$
	I cannot play, but would like to contribute
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	cannot play, but would like to contribute to help make this event a success. (or my business) would like to be recognized as a
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