

**Panhandle Home Health's  
Fourth Annual Miniature  
Golf Tournament!**

We are honored to have CoxHollidaPrice LLP as our major sponsor and to be partnering with JayDee's Family Fun Center to make this event possible. Clubs and balls will be provided by JayDee's. Dinner is being sponsored by Essroc Italcementi Group. Registration for event opens at 11:30 a.m. Snack provided by Chick-fil-A.



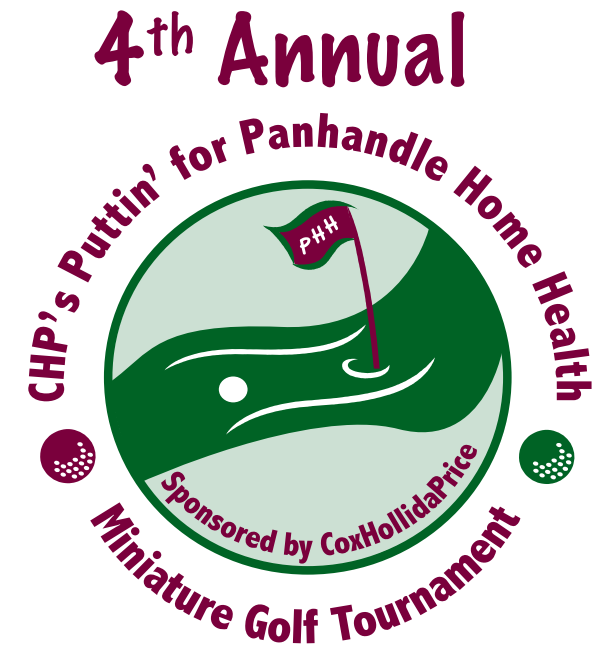
*Bringing Healthcare Home*



Partner Agency  
CFC# 37660



Panhandle Home Health, Inc.  
208 Old Mill Road, Martinsburg, WV 25401



*A fundraiser at*  
**JayDee's Family Fun Center**  
*off Route 51 in Inwood*

**50/50 raffles,  
FOOD - FUN - PRIZES**  
ATM on site

**April 26, 2012**  
Shot-gun start at 1:00 pm

*Rain Date:*  
*Thursday, May 3, 2012*



**Your Future, Our Passion.**

We are looking for team and individual participants!

**Participation and Sponsorship Opportunities:**

**Eagle Package \$275**

Includes tee sponsorship, four players, lunch and dinner

**Birdie Package \$150**

Tee sponsorship only

**Par Package \$40**

Per player - includes lunch and dinner

**Dinner and prizes at the end of the tournament. Fun, Food, Prizes and Raffles included. (ATM on site)**

For questions call Christina Johnson at 304-263-5680 ext 122



Return form to: Panhandle Home Health, Inc. 208 Old Mill Road, Martinsburg, WV 25401

Fax: 304-267-1532

Cut and return form

**CHP's Puttin' for Panhandle Home Health**

*Return your form quickly! We have a limited number of spaces!*

*Registration Form*

Main Contact Name: \_\_\_\_\_

Company: \_\_\_\_\_

Address: \_\_\_\_\_

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

E-mail: \_\_\_\_\_ Phone: \_\_\_\_\_

Participation/Sponsorship:

**Eagle Package** \$275 - includes tee sponsorship, four players, lunch and dinner

**Birdie Package** \$150 - tee sponsorship only

**Par Package** \$40 per player - includes lunch and dinner

# of players \_\_\_\_\_ x \$40 = \_\_\_\_\_



Names of players – please include email for each player: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

What do you want your tee sign to say? \_\_\_\_\_

Method of Payment

Check enclosed

Please invoice address above

Credit card

Name on card \_\_\_\_\_

Billing Address \_\_\_\_\_

Visa  Mastercard Credit Card # \_\_\_\_\_

Expiration Date \_\_\_\_\_ 3 Digit Code on Back \_\_\_\_\_

Signature \_\_\_\_\_

To register and pay online go to [www.panhandlehomehealth.org](http://www.panhandlehomehealth.org) and click the Donate Now button.