REGISTRATION FORM

The 16h Annual JOHN MUIR GOLF TOURNAMENT Van Cortlandt Park Golf Course Friday, September 13, 2013

By Mail: Tel: 212 605 0338 Fax: 212 605 0222 Email: asfevents@wwbcny.com American-Scottish Foundation, Inc. Scotland House 575 Madison Avenue, 10th Floor Register by September 2, 2013 New York, New York 10022-2511 Please complete the form below to register a group or individuals Please check your choice of support: I would like to register as a ___ TEAM of 4 players \$700 for a total registration of \$ Name of Team _____ Names of Players _____ I would like to register as an ___ INDIVIDUAL player \$175 for a total registration of \$ ______ \$ I would like to make a **Designated Donation to the John Muir Nature Trail** of I would like to make a Designated Donation to the work of the ASF of \$ I regret I am unable to attend but wish to make a donation of My company _____ will match my gift Registration amount total: ____ Check (payable to The American-Scottish Foundation, Inc.) ____ MasterCard ____ VISA ____ AMEX Account Number______Expiration ____/___ Code______ Account Name ______ Signature _____ Company Name _____ Contact _____ Address _____ State Zip Telephone _____ Email ____

Each player is liable for any damage to person, the course, equipment, golf carts, clubhouse facilities for which he/she may be responsible. Each player should maintain his/her own liability insurance and further agrees to hold Van Cortlandt Park Golf Course, The Van Cortlandt Park Conservancy and The American-Scottish Foundation® harmless from all damages and injury referred to above.

_____ Date ____

Signature of Applicant or Team Representative _____