



TUNIS SHRINERS No. 179

INSTITUTED JULY 3, 1975

CHARTER JULY 8, 1976

Telephone: 613-729-2296
Fax: 613-729-3545
Website: www.tunisshriners.ca

2140 Walkley Road
Ottawa, Ontario
K1G 3V3

Tunis Shriners 2023 Masonic Golf Tournament

Tunis Shriners will be hosting its 7th annual Golf Tournament on Tuesday, August 22nd, 2023, at our new location the Meadows Golf and Country Club. Proceeds will be going towards supporting Local Charities as well as Tunis Shriners activities.

Tunis Shriners were limited in the number of participants we could field in last year's golf tournament and are hoping we can get back to our norm of around 145 participants. The one thing that has not changed, is the needs for our Charities and Tunis Shriners Activities to keep moving forward, because without your support and organizations such as ours they would be lost.

We are anticipating that the 2023 Golf Tournament will be bigger and better.

If we receive your registration prior to July 6th, 2023, the cost per player will be \$140.00 and \$560.00 per team. If we receive your registration after July 6th, the cost will be \$145.00 per player or \$580.00 per team.

Included in your registration:

1. Golf (including golf cart)
2. Free access to the driving range
3. Individual participation gifts
4. Memory photo
5. Breakfast sandwich and lunch
6. Awards Dinner (Additional guests for dinner are \$40.00 per person)



We plan on having a great day of friendship and fun, with a number of challenges set out on the putting green and the course, i.e., putting contest, closest to the hole, hit the green, poker run, as well as a silent and live auction.

Schedule:

Registration/check-in 8:30 am to 9:45 am

In Golf Carts 9:45 am

Shot Gun 10:00 am

Attached is the registration form which can be mailed back to Tunis Shriners Golf Tournament, c/o Robert Schrader at 2140 Walkley Road, Ottawa, Ontario, K1G 3V3 or emailed to tunisshrinersgolf@gmail.com. The registration form can also be found on our website <https://tunisshriners.ca> along with other tournament information.

For any further information or questions please contact Bob Schrader at 873-353-6605 or Chal Conn at 613-258-5019 or email us at tunisshrinersgolf@gmail.com.

We are looking forward to your participation in our 7th annual Tunis Shriners Golf Tournament.

If you plan on putting a team together, please let us know as soon as possible.

Thank you for your support.

A handwritten signature in black ink, appearing to read 'Adam Thompson'.

Ill Sir Adam Thompson
Potentate 2023

A handwritten signature in black ink, appearing to read 'Robert Schrader'.

Robert Schrader P.P.
Golf Tournament Chair



Telephone: 613-729-2296
Fax: 613-729-3545
Website: <https://tunisshriners.ca>

TUNIS SHRINERS No. 179

INSTITUTED JULY 3, 1975

CHARTER JULY 8, 1976

2140 Walkley Road
Ottawa, Ontario
K1G

2023 GOLF REGISTRATION

DATE

Tuesday August 22nd, 2023

TIME

Registration: 8:30 am – 9:30 am

PLACE



Meadows Golf and Country Club
4335 Hawthorne Road
Ottawa, Ontario
K1G 3N4
613-822-2582

QUESTIONS

Contact: Bob Schrader at
schrader.tunis@gmail.com or call
873-353-6605.

Contact: Chal Conn at
wstringer1@cogeco.ca
or call 613-258-5019.

INCLUDED IN YOUR REGISTRATION

1. Golf (including golf cart)
2. Lunch and Dinner
3. Individual participant gift
4. Memory Photo
5. Opportunity to win some great prizes.

MAILING ADDRESS

Tunis Shriners
C/O Robert Schrader
2140 Walkley Road
Ottawa, Ontario
K1G 3V3



Completed Form and Cheque Are Due by August 7th, 2023.

Your Name:

Company Name:

Email:

Phone:

Address:

City/Postal Code:

REGISTER YOUR TEAM TODAY

FOURSOME (If applicable Lodge Name after players name)

Team Name:

Player 1:

Player 2:

Player 3:

Player 4:

FEES

If we receive your registration prior to July 6th, 2023, the cost per player will be \$140.00 and \$560.00 per team. If we receive your registration after July 6th, the cost will be \$580.00 per team. REGISTER EARLY FOR THE SAVINGS.

I prefer to pay by cheque ☐ payable to Tunis Shriners #179 or Cash ☐
by e-transfer to: duesandevents@tunisshriners.ca ☐

Please use my VISA ☐ MASTER CARD ☐

Card Number:

CCV Number:

Expiry Date (M/Y):

Name on Card:

Postal Code: