



4th Annual Vancouver Island Chapter CIP Society of BC Golf Tournament & Dinner

Wednesday, June 23, 2010
Cedar Hill Golf Course - **Victoria**

**Great door prizes, prize holes, the popular 'Bring'em Back Alive' contest
& TWO \$10,000 Hole-In-Ones!**

- Date:** Wednesday, June 23, 2010
- Time:** Registration 11:00 / 1st Tee off 1:30 pm (approx) / Cocktails 6 pm / Dinner 7 pm
Tee times to be advised once registration closes and foursomes set up – registration will be 30 mins prior to your tee time.
- Format:** Texas Scramble OR Individual Scoring
- Location:** Cedar Hill Golf Course, 1400 Derby Rd, Victoria, BC
- Fees per participant** (incl. GST):
- \$ 95.00 - CIP Society Members** (CIP & FCIP **GRADUATES**)
 - \$ 110.00 - ALL others** (incl. Insurance Institute of BC members)
Above fees include golf & dinner. Golf carts NOT included.
 - \$ 40.00 - Dinner only** (use below registration as well)

Golf Carts: For golf cart reservations, please contact the Cedar Hill Pro-Shop at 250-475-7151.

Registration Deadline: June 15, 2010

Registration form can also be found on our website under events at www.insuranceinstitute.ca

Insurance Institute of BC

1110 – 800 West Pender St, Vancouver, BC V6C 2V6
(t) 604.681.5491 (f) 604.681.5479
IIBCmail@insuranceinstitute.ca

REGISTRATION FORM

4th Annual CIP Society Golf Tournament (VICTORIA)

Register: Please complete and send **before June 15**

Fax, Mail/Courier with cheque OR with Credit Card Details:

Insurance Institute of British Columbia

1110 - 800 W Pender St, Vancouver, BC V6C 2V6 - **FAX:** 604-681-5479

**** Recommended to FAX form prior to sending cheque to secure a spot ****

Name or Team Contact: _____

Company Name: _____

Address: _____

Phone: () _____ **Fax:** () _____

Email (*important to receive confirmation*): _____

Names of registrants (including Dinner only):

*** Please enter Golf Level: 1=Experienced / 2=Novice / 3=Beginner**

Name: _____ **Company:** _____ / * ___ / **Dinner Only** / **Fee:** _____

Name: _____ **Company:** _____ / * ___ / **Dinner Only** / **Fee:** _____

Name: _____ **Company:** _____ / * ___ / **Dinner Only** / **Fee:** _____

Name: _____ **Company:** _____ / * ___ / **Dinner Only** / **Fee:** _____

Only confirmed CIP & FCIP graduates are eligible for the reduced fee of \$95.00. If you cannot confirm CIP Society member status, the full fee of \$110.00 must be paid. Dinner ONLY fee \$40.

Total Amount of Payment: \$ _____

Method of Payment: Cheque (payable to 'Insurance Institute of BC') / Cheque to follow / VISA / MasterCard / Amex

Card Number: _____ **Expiry:** _____ / _____

Cardholder: _____

Signature: _____ **Date:** _____

PAYMENT & FINAL PARTICIPANT NAMES MUST BE RECEIVED before June 15, 2010.

Cancellation Policy:

- **NO REFUNDS. Rain or Shine!**
- Participant substitutions permitted up to June 18, 2010.
- IIBC reserves the right to cancel the tournament due to unforeseen circumstances. Should this occur, registration fees will be refunded.

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Or contact Donna Salahor directly at dsalahor@insuranceinstitute.ca or (T) 250-216-9393