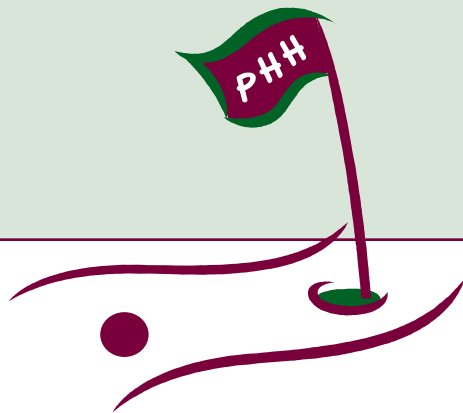


## Panhandle Home Health's Second Annual miniature golf tournament!

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.

**PANHANDLE**  
HOME HEALTH, INC.

[www.PanhandleHomeHealth.org](http://www.PanhandleHomeHealth.org)



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



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

**April 29, 2010**  
**Shot-gun start at 2:00 pm**  
**Rain Date: Thursday, May 6, 2010**

**Dinner and prizes  
at the end of the tournament.**

*Food – Fun – Prizes!*

 *Sponsored by*  
**CoxHollidaPrice LLP**  
CERTIFIED PUBLIC ACCOUNTANTS AND CONSULTANTS

**Your Future, Our Passion.**

We are looking for team and individual participants!

**Participation and Sponsorship Opportunities:**

**Eagle Package \$250**

Includes tee sponsorship, four players, and dinner

**Birdie Package \$150**

Tee sponsorship only

**Par Package \$35**

Per player - includes dinner

**Dinner and prizes at the end of the tournament.**

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

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

Cut and return form

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

*Registration Form*

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

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

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

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

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

Participation/Sponsorship:

**Eagle Package** \$250 - includes tee sponsorship, four players, and dinner

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

**Par Package** \$35 per player - includes dinner

# of players \_\_\_\_\_ x \$35 = \_\_\_\_\_



Names of players [if known at this time]: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

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

Method of Payment

Check enclosed

Please invoice address above

Credit card

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

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

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

Signature \_\_\_\_\_