



VENTURA COUNTY AA CONVENTION FELLOWSHIP OF THE SPIRIT 41ST ANNUAL VCAAC FUNDRAISER GOLF TOURNAMENT REGISTRATION:

Team Captain and/or

Player 1 _____ Phone _____ Fee \$ _____

Address _____

City _____ State _____ Zip _____

Player 2 _____ Phone _____ Fee \$ _____

Player 3 _____ Phone _____ Fee \$ _____

Player 4 _____ Phone _____ Fee \$ _____

Charitable contribution to scholarship entries
for those less fortunate:

Gift Amount \$ _____

Cost is \$80 per player: Total Fees \$ _____

Register BEFORE July 31 for \$10 discount per player

Players MUST be Pre-Paid to Play!

Mail Completed Form and Check Payable to: VCAAC, Inc.,
P.O. BOX 2373 Camarillo, CA 93011

Golf Registration also at www.VCAAC.org