

**Bishop Budka Eparchial Stewardship Society Inc (BBESSI)**  
**214 Avenue M South, Saskatoon SK S7M 2K4: Phone: 306-653-0138, ext 223**  
**ANNUAL EPARCHIAL GOLF TOURNAMENT REGISTRATION FORM**

<b>GOLFER #1</b> Name: _____ Address: _____ City: _____ Prov: _____ PC: _____ Email Address: _____ Home or Cell Telephone: _____	<b>PAYMENT TRANSACTION</b> Registration Fee: _____ X \$150.00    \$ _____ Additional Dinner Tickets: _____ X \$25.00    \$ _____ Total Amount Payable: _____ \$ _____ <b>Cheques payable to: BBESSI _____ Or, charge total amount payable to my: Visa _____; MasterCard _____</b> Credit Card Number: _____ Expiry Date: _____ : Name on Card: _____
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<b>GOLFER #2</b> Name: _____ Address: _____ City: _____ Prov: _____ PC: _____ Email Address: _____ Home or Cell Telephone: _____	<b>PAYMENT TRANSACTION</b> Registration Fee: _____ X \$150.00    \$ _____ Additional Dinner Tickets: _____ X \$25.00    \$ _____ Total Amount Payable: _____ \$ _____ <b>Cheques payable to: BBESSI _____ Or, charge total amount payable to my: Visa _____; MasterCard _____</b> Credit Card Number: _____ Expiry Date: _____ : Name on Card: _____
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<b>GOLFER #3</b> Name: _____ Address: _____ City: _____ Prov: _____ PC: _____ Email Address: _____ Home or Cell Telephone: _____	<b>PAYMENT TRANSACTION</b> Registration Fee: _____ X \$150.00    \$ _____ Additional Dinner Tickets: _____ X \$25.00    \$ _____ Total Amount Payable: _____ \$ _____ <b>Cheques payable to: BBESSI _____ Or, charge total amount payable to my: Visa _____; MasterCard _____</b> Credit Card Number: _____ Expiry Date: _____ : Name on Card: _____
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<b>GOLFER #4</b> Name: _____ Address: _____ City: _____ Prov: _____ PC: _____ Email Address: _____ Home or Cell Telephone: _____	<b>PAYMENT TRANSACTION</b> Registration Fee: _____ X \$150.00    \$ _____ Additional Dinner Tickets: _____ X \$25.00    \$ _____ Total Amount Payable: _____ \$ _____ <b>Cheques payable to: BBESSI _____ Or, charge total amount payable to my: Visa _____; MasterCard _____</b> Credit Card Number: _____ Expiry Date: _____ : Name on Card: _____
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- Options for submitting your completed form:**
1. Complete/Print and then scan your completed form and email as an attachment to: [bbessi@outlook.com](mailto:bbessi@outlook.com).
  2. Complete/Print and return your completed form to: BBESSI – 214 Ave. M South, Saskatoon, SK S7M 2K4.