

2009 Turkey Shoot

Great Handball ~ Great Food ~ Great Friends

Prizes:

Singles & Doubles: 1st place: plump Sonoma County turkeys & fine wine.
2nd place: Turkeys & applause

START TIME: Handball / Food Friday, November 20th. 4pm.

LOCATION: The Parkpoint Club
1200 N. Dutton Ave.
Santa Rosa, CA 95401

HOSPITALITY:

Friday Night	—	BBQ hot dogs, chips, beverages
Saturday Morning	—	Continental breakfast
Saturday Lunch noon-2 pm	—	Extraordinary buffet
Saturday Dinner 6-8 pm	—	Full dinner and dessert
Sunday Morning	—	Continental breakfast
Sunday Lunch noon-2 pm	—	Everything that's fit to eat or drink!

Complimentary beer, wine, soft drinks, and Gatorade throughout tournament for players and their guests.

Hospitality for Player's guests: Adults \$10 per meal,



1200 North Dutton Avenue
Santa Rosa, CA 95401



29th Annual Turkey Shoot

HANDBALL TOURNAMENT

Friday, Saturday,
and Sunday

November 20-22 2009



The Parkpoint Club Handball Turkey Shoot

Friday—Sunday, November 20—22rd

Join us at the 29th Anniversary of Northern California's most hospitable handball tournament, The Turkey Shoot.

- | | |
|---|--|
| <input type="checkbox"/> Open / A Singles | <input type="checkbox"/> B / C Doubles |
| <input type="checkbox"/> B / C Singles | <input type="checkbox"/> 50+ Doubles |
| <input type="checkbox"/> Open / A Doubles | <input type="checkbox"/> 60+ Doubles |

Strictly limited entries in each division. One event per player; drop down competition assures 2 matches for all players.

ENTRY FEE: \$55 per player

DEADLINE: Friday, November 13th, 6:00 pm. **No phone entries.**

Limited space in all divisions, no late entries.

Call for start times after 6:00 pm, November 18th.

Mail entries to: The Parkpoint Club Turkey Shoot
1200 N. Dutton Ave., Santa Rosa, CA 95401
Phone 707-578-1640

No refunds after November 17th.

For more information contact Lyndy Durling at 578-1640.

Application will not be considered valid unless waiver is signed and payment included for *all* players. No exceptions.

Player #1 information, *please print* :

Name: _____
Address: _____
City: _____ State _____ Zip _____
Home #: _____ Cell#: _____
Email _____

Sweatshirt Size S M L XL XXL

(Complimentary Entry Gift)

Tourney Fee: \$55 \$110

I would like Parkpoint to charge my card: \$55 \$110

Visa Mastercard # _____ Exp. _____

Check enclosed: Make checks payable to THE PARKPOINT CLUB.

WAIVER

I hereby, for myself, my executors or administrators waive and release any rights and claims for all damages I may have against Parkpoint Health Club, or their respective agents, or any facility used for this tournament, for all injuries, damages or loss which may be suffered by me in connection with my participation in this tournament.

Signature: _____ Date: _____

Player #2 information (if applicable), *please print* :

Name: _____
Address: _____
City: _____ State _____ Zip _____
Home #: _____ Cell#: _____
Email _____

Sweatshirt Size S M L XL XXL

(Complimentary Entry Gift)

Tourney Fee: \$55 \$110

I would like Parkpoint to charge my card: \$55 \$110

Visa Mastercard # _____ Exp. _____

Check enclosed: Make checks payable to THE PARKPOINT CLUB.

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Signature: _____ Date: _____

GUESTS and FAMILY are welcome to accompany players, as always. You may bring your children—they must be supervised at all times.