

# The 20<sup>th</sup> Annual Jonathan Robertozzi Memorial Scholarship Fund Golf Tournament

A Joint Fundraiser hosted by the NJSOP and the NJPMS



**Join us** for what will surely be an enjoyable day of golf on June 6, 2018! In conjunction with the New Jersey Podiatric Medical Society, proceeds from this event will benefit the Dr. Leslie Mintz Scholarship Foundation, the Dr. Richard J. Favreau, OD Health Foundation, and the Jonathan Robertozzi Memorial Scholarship Fund (NJPMS).

**Details:** The tournament will take place at the Pine Barrens Golf Club (540 South Hope Chapel Rd., Jackson, NJ). **Limited to the first 80 golfers. Soft spikes are required!** If you cannot make it for the daytime sporting event, join us for cocktails and dinner! Registration includes:

## Schedule of Events:

Registration.....	11:30 am
Lunch.....	12:00 pm
Shotgun Start - Best Ball.....	1:00 pm
Cocktail Reception.....	5:30 pm
Dinner + Awards Presentation.....	6:30 pm

**Remember, this event is limited to the first 80 golfers!**

**Registration Includes:** Greens Fees • Golf Carts • Hole-in-One Contest • Putting Contest • Golf Prizes • Free Driving Range • Golf Balls + Tees • Door Prizes • Extra Raffle • Lunch • Cocktail Reception • Dinner -- **Complete and return the registration form on reverse side!**

**The Dr. Leslie Mintz Scholarship** is awarded annually to an optometry school students who possess academic excellence, financial need, and the desire to serve the profession of optometry as did Dr. Leslie Mintz. The amount of each scholarship award can fluctuate based upon the yearly performance of the scholarship endowment fund.

**The Richard J. Favreau, OD Health Foundation** serves as a catalyst for ideas, partnerships, and programs that improve the health and quality of life of at-risk populations in New Jersey. This is achieved by concentrating efforts on funding programs which increase public awareness and provide services to expand eye health and vision care access, ultimately enhancing the qualirt of life for our target populations.

# 2018 NJSOP/NJPMS Golf Outing Registration

## CONTACT PERSON:

(1) Name: \_\_\_\_\_ Title: \_\_\_\_\_

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

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

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

Check Appropriate Box: ☐ Golf, lunch, cocktail reception, and dinner  
\$275 each (\$1,100/foursome) ☐ Cocktail reception & dinner  
\$100 each

## MEMBERS IN PARTY:

(2) Name: \_\_\_\_\_ Title: \_\_\_\_\_

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

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

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

(3) Name: \_\_\_\_\_ Title: \_\_\_\_\_

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

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

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

(4) Name: \_\_\_\_\_ Title: \_\_\_\_\_

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

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

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

## PAYMENT OPTIONS:

☐ Check for \$ \_\_\_\_\_ enclosed for \_\_\_\_\_ guests.

Please make check payable to the NJSOP.

**Mail completed registration form and check to the NJSOP at 4 AAA Drive, Suite 204, Hamilton, NJ 08691.**

☐ Credit Card payment for \$ \_\_\_\_\_ for \_\_\_\_\_ guests.

☐ Visa ☐ Mastercard ☐ Amex Expiration Date \_\_\_\_\_

Authorized Signature ☐ \_\_\_\_\_

**Mail completed registration form to the NJSOP at 4 AAA Drive, Suite 204, Hamilton, NJ 08691 or Fax to (609) 323-4014.**

Online registration is also available at [www.njsop.org](http://www.njsop.org).

All registrations will be confirmed upon receipt of payment.

Deadline for cancellation is **May 25, 2018** to receive a full refund. No-shows are subject to full cost.

**There is no rain date.** In the event of cancellation by committee, participants will receive a full refund.

**Questions?** Contact the NJSOP at (609) 323-4012 or visit us online at [www.njsop.org](http://www.njsop.org).