



# 8th Annual Cher Bear Open Four Man Scramble Golf Outing

To Benefit  
"Saving Sophie"

Saturday, June 13th 2015  
Springvale Golf Course

5871 Canterbury Rd., North Olmsted, Oh 44070

*2 year old Sophie was diagnosed with stage 3 cancer called embryonal rhabdomyosarcoma in July 2014. She underwent 6 weeks radiation therapy while staying at the Ronald McDonald House and is currently still receiving her 42 weeks of chemotherapy treatments.*

*Once her chemo is complete she will likely need eye, oral, and facial reconstructive surgeries due to the radiation side effects. Despite all this along with several lengthy hospital stays Sophie has maintained a happy and optimistic attitude, but she is still fighting a battle that no child should have to endure. Any and all prayers and support for Sophie would be greatly appreciated. Sophie's website <http://www.gofundme.com/cxmkk0>*



Registration- 7:00 a.m.

Tee-Off- 8:00 a.m. (Shotgun Start)

2:00 p.m./??? Dinner

\$320/Foursome (First come First Serve Basis)

\$30/Dinner Only

Coffee/juice and pastries at registration

Lunch on course

Steak Dinner

18 Holes of Golf, 50/50, Auctions, Hole Challenges,

Longest drives and closest to the pin, Ball Drop

and Skins Game (\$20 per team, teams only)

## REGISTRATION FORM

Please register by returning this payment, sponsor or volunteer information to **Dennis Peabody, 6006 Sunderland Dr., Parma Oh 44129**. Please make your check or money order payable to Dennis Peabody. For questions call Dennis at (440) 503-2678

Golfer/Dinner \$320/team, \$30 dinner only

Team Captain \_\_\_\_\_

Address \_\_\_\_\_ City/Zip \_\_\_\_\_

Email \_\_\_\_\_ Phone \_\_\_\_\_

Player 2 \_\_\_\_\_ Email \_\_\_\_\_

Player 3 \_\_\_\_\_ Email \_\_\_\_\_

Player 4 \_\_\_\_\_ Email \_\_\_\_\_

I'm interested in:

\_\_\_ \$420 Hole Sponsorship  
(Includes One Foursome)

\_\_\_ \$100 Hole Sponsorship  
(Includes Signage, No Golf)

\_\_\_ SORRY! I am unable to attend  
Please accept my enclosed donation

**Sponsorship/Donations/Volunteers (circle one)**

Name: \_\_\_\_\_

Organization: \_\_\_\_\_

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

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

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