



It is with sincere pleasure that I invite you to be a part of the: **21st Annual Eye Open Golf Tournament**

- When:** Monday, June 19th 8:00 AM (Shotgun Start)
- Where:** Eisenhower Golf Course – United States Air Force Academy, Colorado
- Format:** **The "Optic Cup" & "Optic Bear" Team Scramble:**
Put together your "All-star" Low-Handicapped foursome OR your mixed ability foursome OR we will include you in a foursome of other golfers looking to have a great time for a great cause.
- Price:** **Single: \$225** **Foursome (signed up together): \$800**



19th Hole Lunch Buffet hosted by Eye Associates of Colorado Springs:
A delicious Lunch Buffet which will feature awards and prizes.

All profit from the event will go to two great, volunteer-based, Colorado non-profits: the SEE THE FUTURE Fund and EverythingForSight.org.

Choose your Registration Method:

Register by Mail: Return the enclosed registration form along with your payment (**made payable to the CSDB Trust Fund**) and mail to:

The SEE THE FUTURE Fund
P.O. Box 63022
Colorado Springs, CO 80962-3022

OR

Register On-Line: Go to www.seethefuture.org and click on the "EyeTix.com" link below the Eye Open postcard.

We hope you can join us! Please call or email me if you have any questions.

Sincerely,

Tom

Thomas W. Theune, OD – STF Chairperson
www.seethefuture.org • 719.471.3200 • twtheune@comcast.net



The 21st Annual
Eye Open Golf Tournament
MAIL-IN REGISTRATION FORM

When: Monday, June 19th, 8:00 AM Shot Gun Start
Where: Eisenhower Golf Course @ the US Air Force Academy
Entry Deadline: **Monday, June 12th**

_____ I would like to attend and participate in the with other **low handicap golfers** (must be 15 handicap or lower).

Single: \$225 Foursome (signed up together): \$800

Enclosed is my check for \$_____ for _____ golfer(s).

_____ I would like to attend and participate in the with other **mixed handicap golfers** (no restrictions).

Single: \$225 Foursome (signed up together): \$800

Enclosed is my check for \$_____ for _____ golfer(s).

_____ I am a _____ Corporate Sponsor which includes _____ complimentary golfer(s): **With your Corporate Sponsorship the fee is \$0 for _____ golfer(s) and \$200 for additional golfer(s).**

Enclosed is my check for \$_____ for _____ golfer(s).

_____ I am NOT able to attend, but enclosed is my check for \$_____ to help support The SEE THE FUTURE Scholarship Fund

Mail this form with payment to:

The SEE THE FUTURE Fund

P.O. Box 63022

Colorado Springs, CO 80962-3022

Make check or money order payable to: "C.S.D.B. TRUST FUND" (Colorado School for the Deaf and the Blind)

NAME OF PERSON ATTENDING: _____

USGA Handicap or Typical 18 hole score: _____ Phone: _____

Address: _____ Email: _____

Please include the following golfers in my foursome:

Name: _____ Handicap or 18 hole score: _____

Name: _____ Handicap or 18 hole score: _____

Name: _____ Handicap or 18 hole score: _____

*** Please include all participants email addresses on the back of this form**

For questions or for more information please call: Thomas Theune, OD @ 719-471-3200

or e-mail: twtheune@comcast.net.