

Let's Celebrate!



<<Display Name>>
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Address Correction Requested

Big Stone Health Care Foundation
450 Eastvoid Ave.
Ortonville, MN 56278

Nonprofit Organization
U.S. Postage Paid
Ortonville, MN
Permit No. 100



31ST ANNUAL OAK TREE CLASSIC

SATURDAY, SEPTEMBER 10, 2022

Let's Celebrate!

Ortonville Golf Course • 9 a.m. Tee Times
18 Hole Scramble • Limited to First 54 Pre-Paid Teams
3 Person Teams - Make your own; fill-ins available • No Rain Date

Support the Future of Health Care in our Area
... Here's how you've made a difference:

- Hospital Replacement Project
- New Nursing Home Facility
- Ortonville Area Health Services Capital & Equipment Needs
- New Outreach Center
- Dialysis Center
- Physician Recruitment & Retention
- Scholarships
- Community Grants
- Other Community Health Care Needs

Awards, Raffle Winners & Silent Auction High Bidders Announced After Tournament • Need Not Be Present To Win!

HOLE-IN-ONE PRIZE...

\$10,000 CASH FIRST PERSON TO SHOOT A HOLE IN ONE ON ANY PAR 3 HOLE.

RAFFLE PRIZES... \$20/TICKET ONLY 700 SOLD

- **\$2,000 Cash** (Donated by NSMC Partners)
- **Weekend at Madden's on Gull Lake** (donated by Transmed)
- **Weekend Ice Castle Rental from Artie's Bait & Tackle** (donated by Bluestem Dental)
- **4 Tickets to Men's & 4 Tickets to Women's SDSU 2022 BB games + SF area gift cards** (donated by Sanford Pentagon)
- **\$300 Snake River Farms Meat Bundle**

PLAYING PRIZES

- Yeti to 1st, 2nd & 3rd place teams
- Closest Pin • Longest Drive • Longest Putt

MULLIGANS

FUN & GAMES

Games out on the Course! (Cash Only)
Win prizes valued at \$100 or more.



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\$100/golfer Entry donation includes greens fee and meal/return to: BSHCF • 450 Eastvold Ave • Ortonville, MN 56278. Online: www.bshcf.wordpress.org.

Please Enter me to play:

Name _____ Hcp. _____ Ortonville Golf Club Member Y or N
 Address _____ City _____ State _____ Zip _____
 Email _____
 Need Fill-ins? One Two
 I have a team. My teammates are _____
 Pair us with the team of _____

Cart Rental (\$40/cart) One Two
 Enclosed is my check in the amount of \$_____ for _____ entry(ies) _____ cart rental(s)
 I can't play but will make a donation! \$_____

◆ **Need not fill in unless paying for entire team** ◆

Other Team Members
(Fill in below if making payment for this golfer.)

Name _____
 Hcp. _____ Ortonville Club Member Y or N
 Address _____
 City _____ State _____ Zip _____
 Email _____

Other Team Members
(Fill in below if making payment for this golfer.)

Name _____
 Hcp. _____ Ortonville Club Member Y or N
 Address _____
 City _____ State _____ Zip _____
 Email _____

Sign your teammate up for email invites!

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