Friday May 20, 2016
THE LEGENDS OF MASSILLON GOLF COURSE  •  10:30 A.M.

EVENT PACKAGE COST: $700 Foursome ($175 per golfer) includes 18 holes, lunch at the turn, dinner/auction and 1 drink token

DINNER ONLY COST: $75 per person/$125 for 2

SPONSORSHIPS:
- $100 hole sponsor includes placard at hole
- $1500 event sponsor includes 1 – foursome, lunch and dinner with drink token and signage throughout the event

Event will happen rain or shine – no cancellation / no refund

PAYMENT MUST BE RECEIVED BY APRIL 1, 2016

“Everyone deserves a fighting chance.”

Register below or on-line at www.walsh.edu/danpeters (On-line convenience fees apply)

For questions, contact Chris Lawton at clawton@walsh.edu

MONETARY DONATIONS and AUCTION ITEM DONATIONS accepted/needed

GOLF OUTING, DINNER AND HOLE SPONSOR SIGN-UP
Register on-line or scan and return to: clawton@walsh.edu or mail to:
Walsh University Office of Advancement, 2020 East Maple Street North Canton, Ohio 44720-3336

<table>
<thead>
<tr>
<th>NUMBER</th>
<th>EACH</th>
<th>TOTAL COST</th>
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<tbody>
<tr>
<td>$700 Foursome</td>
<td></td>
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<tr>
<td>$100 Hole Sponsor</td>
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<tr>
<td>$75 Dinner Only ($125 for 2)</td>
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<tr>
<td>$ Additional Donation</td>
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METHOD OF PAYMENT

- [ ] CHECK
- [ ] VISA
- [ ] MASTERCARD
- [ ] DISCOVER CARD

CREDIT CARD NO.   EXP DATE

NAME ON CARD   ZIP CODE
Thank you for your support of the Dan Peters Memorial Scholarship Golf Outing
Please complete the information below.

<table>
<thead>
<tr>
<th>AUCTION DONATION</th>
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<tbody>
<tr>
<td>In support of the Dan Peters Memorial Scholarship Golf Outing (NAME OF BUSINESS/INDIVIDUAL)</td>
</tr>
<tr>
<td>agrees to donate (DETAILED DESCRIPTION OF ITEM)</td>
</tr>
<tr>
<td>The approximate value of this item is $ ___________________ Restrictions: ___________________</td>
</tr>
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</table>

All proceeds benefit Dan Peters Memorial Scholarship – Items must be received by April 1, 2016

Please fill out the information for tax purposes

<table>
<thead>
<tr>
<th>NAME OF BUSINESS/INDIVIDUAL</th>
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<tbody>
<tr>
<td>MAILING ADDRESS</td>
</tr>
<tr>
<td>CONTACT NAME</td>
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<tr>
<td>EMAIL</td>
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</tbody>
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The undersigned agrees to make the above donation to the Dan Peters Memorial Scholarship Golf Outing.

Authorized signature ___________________________ Date ____________

Please return this form to Chris Lawton and mail your donations to the address and contact listed below:
Walsh University; Attention Chris Lawton • 2020 East Maple Street • North Canton, Ohio 44720
330.490.7111 • 330.490.7249 (Fax) • clawton@walsh.edu