In 1989, the Troop C Grant-A-Wish Program was formed to provide funding and resources so that children with a terminal or life-threatening illness could take trips, meet celebrities, or purchase other items that their families might not otherwise be able to afford.

The Grant-A-Wish Program is funded through private donations, partnerships with the local business community, and the annual Troop C Grant-A-Wish Golf Tournament. The Troop C Grant-A-Wish Program is a private, non-profit corporation with the following criteria:

The child must be between the ages of 1 and 18;

The child must reside in the parishes of Assumption, Lafourche, St. James, St. John or Terrebonne Parishes, or the town of Grand Isle;

The child must have a written diagnosis of a terminal or life-threatening illness from a doctor; and

An approved application reviewed by the Grant-A-Wish Board of Directors.
16th Annual

Troop C Grant-A-Wish Golf Tournament

October 12, 2015

Ellendale Country Club - Houma, LA

Circle Tee Time: Blue Group 7:00 AM Gold Group 12:30 PM

TOURNAMENT USE ONLY

Amount Paid

Check/Trans. No.

Hole Assignment

C O M P A N Y  o r  T E A M  N a m e

1. Name ___________________________ Phone ___________________________
   Address _____________________________________________________________
   City/State ________________________________

2. Name ___________________________ Phone ___________________________
   Address _____________________________________________________________
   City/State ________________________________

3. Name ___________________________ Phone ___________________________
   Address _____________________________________________________________
   City/State ________________________________

4. Name ___________________________ Phone ___________________________
   Address _____________________________________________________________
   City/State ________________________________

E N T R Y  D E A D L I N E :  O c t o b e r  5 ,  2 0 1 5

Inquiries:
Captain Mark Richards
Tournament Director
(225) 456-0664
mark.richards@la.gov

TOTAL AMOUNT DONATED

Method of Payment:
☐ Check (Payable to: Troop C Grant-A-Wish, P.O. Box 607, Schriever, LA 70395)
☐ Credit Card

Card Number ___________________________ Expiration (MM/YY) ___________________________
CVV or Security Code ___________________________ Billing Zip Code ___________________________
Email Address or Mobile Phone Number for Receipt ___________________________