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.

Troop C Grant-A-Wish

P.O. Box 607

Schriever, LA 70395

16th Annual Troop C Grant-A-Wish Golf Tournament

October 12, 2015

Ellendale Country Club

Wishes can come true!

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

____ $1600.00 "BLUE & GOLD" Sponsorship (Entry Fee, Sponsor's Banquet and Grant-A-Wish advertisements)

____ $500.00 Per Team ($125.00 per player)

____ $100.00 Hole Sponsorship

_____ **TOTAL AMOUNT DONATED**

Method of Payment:

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

☐ Credit Card VISA MasterCard American Express Cards DISCOVER

Card Number _____ Expiration (MM/YY) _____

CVV or Security Code _____ Billing Zip Code _____ Email Address or Mobile Phone Number for Receipt _____

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

COMPANY or TEAM Name _____

TEAM CAPTAIN

1. Name _____ Phone _____
   Address _____ City/State _____
2. Name _____ Phone _____
   Address _____ City/State _____
3. Name _____ Phone _____
   Address _____ City/State _____
4. Name _____ Phone _____
   Address _____ City/State _____

ENTRY DEADLINE: October 5, 2015