



**ONTARIO PLUMBING INSPECTORS ASSOCIATION INC.**  
 Plumbing Professionals Working for a Safer Ontario Since 1920

***The 20st Annual Gary Greig  
 Golf Classic Tournament:***

**Sunday, June 22, 2025**

**Quarry Golf Club**

**447 Tara Rd. Ennismore, ON K0L 1T0**

First Name:	Last Name:
Address, City, Province & Postal Code:	
Municipality / Company:	
Telephone:	E-mail (Required):
<b><u>Registration cost:</u></b> \$130.00 each which includes Green Fees, power cart and lunch. <b><u>Tee Time</u></b> : 9:00 am – final confirmation closer to event	
Please note any food allergies:	
<b><u>Dress Code in effect:</u></b> No jeans, shirts must have collars (no T-shirts, tank tops or halter tops), dress shorts with zippers only, soft spikes only please.	
<b>** <u>Please note: The bus pick up time to be confirmed.</u> **</b>	

<b><u>IF YOU ARE PART OF A FOURSOME:</u></b>	**Only 1 player? Don't worry, we will place you in a foursome!
<b><u>Please list names of members:</u></b>	<b><u>Payment Enclosed?</u></b> <b><u>Yes</u></b> <b><u>NO</u></b>
1.	<input type="checkbox"/> <input type="checkbox"/>
2.	<input type="checkbox"/> <input type="checkbox"/>
3.	<input type="checkbox"/> <input type="checkbox"/>
4.	<input type="checkbox"/> <input type="checkbox"/>

<b>Enclosed is payment for:</b>			
<b># of players</b>		<b>at \$130.00 each</b>	
<b>Total Payment =</b>			

<b><u>Payment Type:</u></b> Cheque <input type="checkbox"/> Visa <input type="checkbox"/> MasterCard <input type="checkbox"/>
(Cheques Payable to: OPIASO)
Name on Card: _____ Card Number: _____
Expiry Date: _____ / _____ CVD # _____ Signature: _____
Send Registration to: <p align="center"> <b>Golf Registration 2025 AMES c/o OPIASO</b>  <b>67 Seneca Ave., Hamilton, Ontario, L9B 1L8</b>          or email form to <a href="mailto:rob@armco.on.ca">rob@armco.on.ca</a> </p>

Date Received: \_\_\_\_\_