

**Hendry County Sheriff's Office**  
is  
**Proud to Present...**



*8th Annual*  
*Deputy Brian Haas Memorial Golf Tournament*  
***Sponsorship Levels***



**Platinum**  
**\$5000**

- Two Exclusive Hole Sponsorships
- Prominence on Tournament Sign
- Four Teams



**Gold**  
**\$2000**

- One Exclusive Hole Sponsorship
- Recognition on Tournament Sign
- Two Teams



**Silver**  
**\$1000**

- One Team
- Recognition on Tournament Sign
- Hole Sponsor Sign



**Bronze**  
**\$500**

- One Player Fee
- Recognition on Tournament Sign



**Hole**  
**\$100**

- One Hole Sponsor Sign



**January 19, 2019**

**CLEWISTON GOLF COURSE**

1201 San Luiz Ave.  
Clewiston, Florida

**8:00a.m Player/Team Check-In**  
**9:00a.m Shotgun Start**

**All proceeds go to the**  
**Brian Haas Memorial Scholarship Fund.**

**REGISTRATION COST**

**\$75 per golfer/\$300 per Team**

**Includes:**

**Lunch, Greens Fee and Cart Fee**



**Brian Andrew Haas** started his career with the Hendry County Sheriff's Office as a Corrections Officer in August 2002. His lifelong dream became reality when he successfully completed the Law Enforcement Academy and transferred to Road Patrol on December 1, 2003.

While responding, to back up another deputy on April 24, 2004, Brian tragically lost his life in a car crash. He was 21 years old.

The Brian Haas Criminal Justice Scholarship Charitable Trust was created by Brian's family in May 2004 to provide scholarships to HCSO employees and volunteers who wish to further their education in criminal justice.

**Hendry County Sheriff's Office**  
For More information, please contact Capt. Susan Harrelle @ 863-674-5604 or [sharrelle@hendrysheriff.org](mailto:sharrelle@hendrysheriff.org)  
For Registration: Cindy West @ 863-674-5622 or [cwest@hendrysheriff.org](mailto:cwest@hendrysheriff.org)

**\*\*Registration form on the back\*\***

**REGISTRATION FORM**  
Hendry County Sheriff's Office  
Brian Haas Memorial Golf  
Tournament

**SINGLE PLAYER**

Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_  
Phone: \_\_\_\_\_  
E-mail: \_\_\_\_\_

**TEAM OPTION**

Team Name: \_\_\_\_\_

Player 1: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_  
Phone: \_\_\_\_\_  
E-mail: \_\_\_\_\_

Player 2: \_\_\_\_\_

Player 3: \_\_\_\_\_

Player 4: \_\_\_\_\_

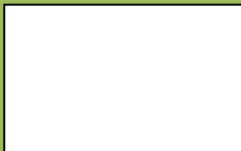
**PAYMENT METHOD**

\_\_\_\_\_ Check Attached \_\_\_\_\_ Please Charge My

\_\_ VISA \_\_ MasterCard

\_\_\_\_\_ I will pay the day of \_\_\_\_\_ AmEx \_\_ Discover

Card #: \_\_\_\_\_



Amt Due

Expiration: M \_\_\_ Y \_\_\_

3 Digit Code: \_\_\_\_\_