

22nd ANNUAL DIABETES GOLF BENEFIT

COURSE INFORMATION:

Pine Lakes Golf Club
6233 W. Liberty Street
Hubbard, OH 44425
Phone: 330.534.9026

»Scan to your smartphone for directions:



*If you have any questions,
please contact Michael Vallas
at 330.629.8800*



NOMS
ANKLE & FOOT
CARE CENTERS

Diabetes
Partnership
of the Mahoning Valley

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www.NomsHealthCare.com
www.diabetespartnershipmv.com



9:30 am
10:30 am

Registration
Shotgun Start

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ABOUT THE EVENT

Welcome to the 22nd annual NOMS Ankle & Foot Care Centers Diabetes Golf Benefit. Diabetes is a devastating disease that affects the lives of millions of people. NOMS Ankle & Foot Care Centers works with the Diabetes Partnership of the Mahoning Valley to provide medicine and assistance to those affected by diabetes. The golf benefit will be held at Pine Lakes Golf Club in Hubbard and will include 18 holes of golf, lunch and dinner, beverages on the course and skill contests.

Registration will be 9:30 a.m., with a shotgun start at 10:30 am. Lunch will be served on the course with dinner at the pavilion immediately after golf. We look forward to seeing everyone again this year. Please join us for a fun-filled day of golf.

Sincerely,
*The Doctors and Staff of
NOMS Ankle & Foot Care Centers*



GOLFERS

The golf format is a four-person scramble. Skill and door prizes will be awarded. The fee is \$100 per player and includes 18 holes of golf with cart, entry into the skins match, one mulligan, lunch and beverages on the course and dinner at the pavilion. If you have a preferred foursome, please list all four names on your registration form. Individuals and pairs are welcome and will be combined into groups.

SPONSORS

Please help support the event through a sponsorship.

Hole Sponsor - \$125: A custom-made sign with your company name will be placed on a golf hole.

Corporate Sponsor - \$300: Special recognition at the registration area and dinner pavilion, and custom-made sign.

Your contribution may be tax-deductible.

RESERVATION DEADLINE:
Friday, Aug. 6

REGISTRATION FORM

22nd Annual Diabetes Golf Benefit

- ☐ Yes, I want to sponsor a golf hole \$125
☐ Yes, I want to be a corporate sponsor \$300
☐ Yes, I want to play as an individual \$100
☐ Yes, I want to enter a foursome \$400
☐ Yes, I want to make a donation \$ _____

TOTAL: _____

Contact Name: _____

Company: _____

Address: _____

Phone: _____

Players

1. _____
2. _____
3. _____
4. _____

**Detach this form
and send with payment to**
NOMS Ankle & Foot Care Centers
Attn: Dr. Michelle Anania
1450 S. Canfield-Niles Road
Austintown, OH 44515

**Checks should be made payable to
Community Foundation
of the Mahoning Valley.**