



WEDNESDAY, JULY 10TH

**Registration Opens at 3:00PM
Games Start at 3:30PM**

**Thompson Park
1701 Perrineville Rd., Monroe Twp.**

**For Questions or to Register
Contact Jaclyn@cainj.org or 609-588-0030**

100% of Proceeds Donated to
MAKE-A-WISH®
New Jersey

Team Name or Spectator: _____

Company Name: _____

Phone: _____

Email: _____

___ Team of (4) four (\$100) or ___ Spectator (\$30)

Team Information (please include name & company)

1. (Captain) _____

2. _____

3. _____

4. _____

TOTAL: \$ _____

Payment Methods:

1.) Pay by check, payable to:

CAI-NJ
Attn: 2019 CAI-NJ Olympics
500 Harding Road, Freehold, NJ 07728

2.) Pay by credit card. Please fax to (609) 588-0040.

Cardholder Name: _____

Card Number: _____

Exp. Date: _____ Sec. Code: _____

Cardholder Signature: _____

*Cardholder acknowledges receipt of goods and/or services in the amount of the total shown hereon and agrees to perform the obligations set forth in the cardholder's agreement with issuer.

Cancellations will be accepted until July 5th. Refunds will not be given after this date, swaps can be made at any time.

***Please Note: Persons Under The Age of 21 Will Not Be Permitted to Attend this Event and Will Be Asked To Leave Upon Arrival.**