



Hospice &  
Palliative Care  
*of Westchester*

EIGHTH ANNUAL  
*Golf Invitational*

*Attendee List*

GOLFERS

HANDICAP


DINNER GUESTS


Hospice & Palliative Care  
*of Westchester*  
311 North Street - Suite 204  
White Plains, NY 10605

Non-Profit Organization  
U.S. Postage  
**PAID**  
Permit No. 1291  
White Plains, NY 10601-4403



Hospice &  
Palliative Care  
*of Westchester*

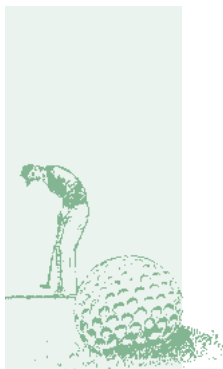
EIGHTH ANNUAL  
*Golf Invitational*

Tuesday  
**JUNE 15, 2010**  
Westchester Hills Golf Club  
White Plains

GRAND SPONSORS  
**Entergy**

**Hildegard D. Becher  
Foundation, Inc.**

SPONSORS  
**Beecher Funeral Home, Inc.  
Gallagher Benefit Services  
James P. O'Toole Consulting**



# Hospice & Palliative Care of Westchester

## EIGHTH ANNUAL Golf Invitational

### Golf Invitational Co-Chairmen

John D'Agostino,\*\* Larry Dix, William Flooks, Jr.,\*\*  
Michele Geller\*\*, Jack Geoghegan, Joseph C. Marchese,  
James P. O'Toole,\*\*\* Jim Steets, John Zanzarella

### Committee

Michael J. Amoruso, Esq.**	Thomas S. McTeigue, Jr.
Armand Bassi	Mary Beth Morrissey, Esq.**
Joanne T. Ciaramella, Esq.**	Elizabeth Murphy**
Constance Corroon*	Tim Murphy
Katharine Wilson Conroy, Esq.*	Jaquelyn Pirri
Barbara Costello**	Louis Roberti
George Delaney	John Scieurba**
Joan DiPalma**	Lori Sheldon
Doris Escher, MD*	Ann Smith**
Matthew Fiorillo**	Ronald Stytzer
Kevin Hanlon	T. Daniel Tearno
Wiley C. Harrison**	Barbara Vrooman
Rita Kokkoris	Jennifer Watts**
Karen LaMonica**	Kate Colburn, M.A.
Kathleen Lonergan**	<i>Executive Director</i>
Kathleen McArdle**	
Michael McCooley	Chairman, Board of Directors***
Susan McDonnell	Member, Board of Directors**
	Honorary Board Member*

*Your support will help Hospice & Palliative Care of Westchester continue to provide extraordinary and dignified comfort, care and compassion to every individual and family facing a serious or life-threatening illness.*

## INFORMATION

**DATE:** TUESDAY, JUNE 15, 2010  
**PLACE:** WESTCHESTER HILLS GOLF CLUB  
 White Plains, NY  
**TIME:** Brunch/Lunch/Registration 10:30 AM  
 Golf 12:30 PM  
 (Shotgun start with shamble format)  
 Cocktail Reception,  
 Dinner & Awards 5:00 PM

## HOLE-IN-ONE CONTEST

Sponsored by:  
**ARROWAY CHEVROLET CADILLAC**  
 of MT. KISCO  
 175 North Bedford Road, Mt. Kisco, NY 10549

## SPONSORSHIPS

<b>GRAND SPONSORSHIP</b>	<b>\$5,000</b>
includes foursome, hole signage and all activities.	
<b>SPONSORSHIP</b>	<b>\$3,000</b>
includes foursome, hole signage and all activities.	
<b>DINNER SPONSORSHIP</b>	<b>\$2,500</b>
includes foursome, hole signage and all activities.	
<b>LUNCHEON SPONSORSHIP</b>	<b>\$2,500</b>
includes foursome, hole signage and all activities.	
<b>FOURSOME SPONSORSHIP</b>	<b>\$2,000</b>
includes foursome, hole signage and all activities.	
<b>FOURSOMES</b>	<b>\$1,600</b>
includes all activities.	
<b>PRACTICE RANGE SPONSORSHIP</b>	<b>\$500</b>
<b>INDIVIDUAL PLAYER</b>	<b>\$400</b>
includes all activities.	
<b>HOLE SPONSORSHIP</b>	<b>\$400</b>
<b>COCKTAIL RECEPTION, DINNER &amp; AWARDS</b>	<b>\$100</b>

# Hospice & Palliative Care of Westchester

## EIGHTH ANNUAL Golf Invitational

### REGISTRATION FORM

- |   |         |
|---|---------|
| <input type="checkbox"/> GRAND SPONSOR              | \$5,000 |
| <input type="checkbox"/> SPONSOR                    | \$3,000 |
| <input type="checkbox"/> DINNER SPONSOR             | \$2,500 |
| <input type="checkbox"/> LUNCHEON SPONSOR           | \$2,500 |
| <input type="checkbox"/> FOURSOME SPONSOR           | \$2,000 |
| <input type="checkbox"/> FOURSOME                   | \$1,600 |
| <input type="checkbox"/> PRACTICE RANGE SPONSOR     | \$500   |
| <input type="checkbox"/> INDIVIDUAL GOLFER          | \$400   |
| <input type="checkbox"/> HOLE SPONSOR               | \$400   |
| <input type="checkbox"/> RECEPTION, DINNER & AWARDS | \$100   |

Name/Title \_\_\_\_\_

Company \_\_\_\_\_

Address \_\_\_\_\_

City/State/Zip \_\_\_\_\_

Telephone \_\_\_\_\_

Enclosed is my check in the amount of \$ \_\_\_\_\_

Please bill my:  AMEX  Visa  MasterCard

Acct # \_\_\_\_\_

Name \_\_\_\_\_

Exp. Date \_\_\_\_\_

Signature \_\_\_\_\_

I am unable to attend, but wish to make a tax deductible contribution in the amount of \$ \_\_\_\_\_.

Please mail this form, together with your check, payable to Hospice & Palliative Care of Westchester, 311 North Street, Suite 204, White Plains, NY 10605. For additional information, call Holly Benedict at (914) 682-1484, ext. 122.

Fair market value of brunch, lunch, golf and dinner is \$250.