



Sponsored by LESAVOY, BUTZ & SEITZ LLC  
**31ST Annual RMA Golf Outing  
And Lunch**

Presented in conjunction with the Lehigh Valley Chapter of the PICPA  
and the Lehigh Valley Consortium of Professional Organizations



**Cost:** \$110 per person includes greens fees, cart and lunch.  
Beverages will be provided on the course.

\$50 per person for lunch ONLY

*\*Alternate meal will be provided upon request.  
Please check appropriate box on the reservation form.*

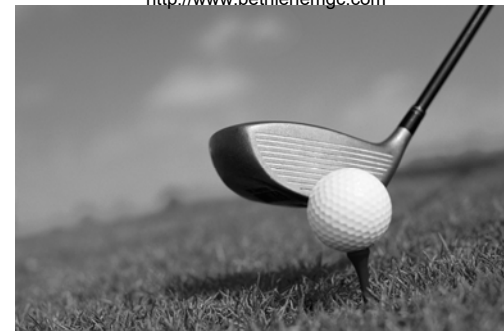
**Schedule:**  
8:00 AM Registration / Warm-up  
9:00 AM Shotgun Start, Scramble Format  
2:00 PM Lunch & Awards

**Teams:** Teams will be grouped prior to the outing and comprised  
of players from different banks and professional firms.

**Prizes:** 1<sup>st</sup> and 2<sup>nd</sup> Low Gross, Closest to the Pin, Straightest Drive and  
Door Prizes **\*\*Please bring gifts for door prizes.**

**Monday, October 7, 2019**

Bethlehem Golf Club  
400 Illicks Mill Road, Bethlehem, PA  
<http://www.bethlehemgc.com>



**Please make reservation and payment no later than Monday, September 30<sup>th</sup>, 2019.**

**Register Online with Two payment options:**

**Pay by Credit Card:** REGISTRATION at <http://community.rmahq.org/EastCentralPA/Home>. Pay via credit card using  
PayPal. Email Golf Foursome and HDCP or Approx. Score to Bill Marks at [bmarks@qnbbank.com](mailto:bmarks@qnbbank.com).

**Pay by Check:** REGISTRATION should now be completed at <http://community.rmahq.org/EastCentralPA/Home>.  
Checks should be made payable to **RMA East Central Pennsylvania** and mail to **Carol Homa, PO Box 74,  
Quakertown, PA 18951.** Please include the completed below form along with your check.

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Enclosed is my check in the amount of \$\_\_\_\_\_ made payable to **RMA East Central Pennsylvania.**

Golf & Lunch: \_\_\_\_\_ at \$110.00 per person = \$\_\_\_\_\_

Lunch Only: \_\_\_\_\_ at \$50.00 per person = \$\_\_\_\_\_

☐ Alternate meal? Number \_\_\_\_\_

Name: \_\_\_\_\_ Email: \_\_\_\_\_ HDCP or Approx. Score: \_\_\_\_\_

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Name: \_\_\_\_\_ Email: \_\_\_\_\_ HDCP or Approx. Score: \_\_\_\_\_

FIRM: \_\_\_\_\_ Phone # \_\_\_\_\_

**Mail Check Payment to:**

Carol Homa  
ECPA RMA Administrator  
PO Box 74  
Quakertown, PA 18951

☎ Bill Marks 215-538-5600 ext 5470  
✉ [bmarks@qnbbank.com](mailto:bmarks@qnbbank.com)