

LETHBRIDGE CURLING CLUB

18th ANNUAL MICHAEL IZSAK MEMORIAL JUNIOR CASH SPIEL

New Dates

October 22 - 24, 2010

1ST PRIZE \$1,000

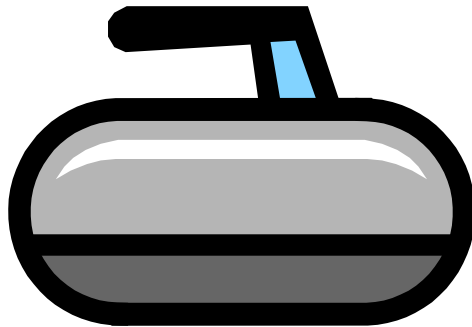
With a TOTAL CASH PAYOUT of OVER \$3,600!

Entry Fee: \$200 (guaranteed 5 games)

(Includes T-Shirt and Banquet and Lots of Fun!)

First 20 paid teams will be accepted

Registration deadline: October 15, 2010



Major Sponsors:

KIRKS TIRES LTD

MANSER TRUCKING

To enter or for additional information contact:

Lethbridge Curling Club

Telephone: (403) 327-1213

Fax: (403) 327-2785

E-mail: letscurl@lethbridgecurlingclub.com

If overnight accommodation is required, please contact one of our Partner Hotels and ask for the Lethbridge Curling Club room rate.

Best Western Heidelberg Inn
1303 Mayor Magrath Drive S.
Lethbridge, AB T1K 2R1
(403) 329-0555
1-800-791-8488

Lethbridge Lodge Hotel (MLC)
320 Scenic Drive South
Lethbridge, AB, T1J 4B4
(403) 328-1123
1-800-661-1232



Summer 2010

Dear Junior Curler;

On behalf of the organizing committee, we would like to extend an invitation to you and your team to participate in our Michael Izsak Memorial Junior Cash Spiel, October 22 – 24, 2010.

Thanks to the generosity of our Title Sponsors – Kirks Tires Ltd and Manser Trucking, our event sponsors, this year's purse is **\$3,660.00** (with a full 20 team entry). The entry fee is \$200.00 per team.

1st Prize A Event - \$1,000.00.

Like our Men's and Ladies Cash Spiels, we are requesting a deposit of 100% of the entry fee to accompany your entry, and we recommend you enter early.

When making your hotel bookings, we ask that you support our sponsors and book one of the hotels on the enclosed listing.

If you have any questions please call the club at (403) 327-1213 or email us at letscurl@lethbridgecurlingclub.com.

Sincerely;

The Organizing committee

MICHAEL IZSAK MEMORIAL JUNIOR CASH

REGISTRATION FORM

Michael Izsak Memorial Organizing Committee
Lethbridge Curling Club
911 - 6th Avenue South
Lethbridge, AB T1J 4N9.
Fax: (403) 327-2875
Email: letscurl@lethbridgecurlingclub.com

Dear Organizing Committee;

Please enter my team in the Michael Izsak Memorial Cash Spiel October 22 - 24. I am enclosing a deposit of \$200.00 cheque or please debit my credit card:

Name on card:

Visa / MasterCard _____ Expiry date: _____.

SKIP	_____	T Shirt Size
THIRD	_____	T Shirt Size
SECOND	_____	T Shirt Size
LEAD	_____	T Shirt Size

Name and Address of Skip or contact person (please specify)

Name	Address	Telephone/Home/Work
Email Address		

REMINDER: A \$200.00 DEPOSIT MUST ACCOMPANY YOUR ENTRY

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