

Benefit Golf Tournament

Aiding Medical Mission of Dr. Tom Catena

SAVE THE DATE

September 18, 2026

Briar Creek Golf Course

Full golf outing: \$150
(includes lunch and dinner)

Early bird discounts
(by September 5th): \$125

Hole Sponsor: \$200

Friends of Dr. Tom sponsorships

- Lunch: \$500
- Dinner: \$500

Donation opportunity
for those who cannot attend

PRESENTED BY:

Bar Associations of

- Schenectady County
- Montgomery County
- Fulton County

The proceeds from this tournament will be used to benefit
Dr. Tom's medical mission for the Mother of Mercy Hospital



Where:

Briar Creek Golf Course
2347 Pangburn Road,
Princeton NY 12056

When: Sept. 18, 2026

Scramble tournament:

- Registration 8 a.m.
- Shotgun Start 9 a.m.

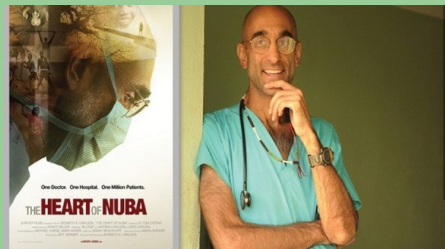
Lunch (boxed lunch)

**19th hole reception
and dinner at 4 p.m.:**

- Steak bake (NY strip steak)
- Vegetarian option available
by advance request

Raffle prizes and contests:

- Longest drive
- Closest to pin



About Dr. Tom:

A native of Amsterdam,
Dr. Catena is the only
permanent doctor serving in
the war-torn region of the
Nuba Mountains in Sudan for
over a decade.

*"Whether terrible things
happen or whether we are in
danger or there is no food,
the idea is we are here to
serve. It is as simple as
that."*

- 'Dr. Tom'



REGISTRATION

*Registration form is attached for more information
and to sign up in advance*

*Schenectady County Bar Association, PO Box 1728, Schenectady NY 12301-1728
Tel: 518-393-4115 • Email: info@schenectadycountybar.org*

REGISTRATION

*Benefit Golf Tournament on September 18, 2026 at Briar Creek Golf Course
Please complete and remit with payment*

By mail: Schenectady County Bar Association, PO Box 1728, Schenectady NY 12301-1728

By phone or email: To reserve today or for more information, please call the SCBA at 518-393-4115 or email at: info@schenectadycountybar.org.

Name: _____

Firm/company: _____

Address: _____

City: _____; State: _____; Zip _____

Phone: _____

Email: _____

Please check:

I have recruited a foursome (*please print*)

Player 1: _____

Player 2: _____

Player 3: _____

Player 4: _____

Please assign me to a foursome

Amount enclosed: _____

(please make check payable to Schenectady County Bar Association)

Full golf outing: \$125/person if submitted by September 5th or \$150/person thereafter

Hole sponsor: \$200

Friends of Dr. Tom Sponsorship Opportunities:

Lunch sponsor: \$500

Dinner sponsor: \$500

Donations

I cannot attend but wish to send a donation

Enclosed is my donation

