



## 2nd Annual SBYC Fishing Tournament to Benefit the Down Syndrome Advocacy Foundation!



### "Mixed Bag" Seabass and Porgy Tournament PLUS BBQ!

PO Box 755  
Stony Brook, NY 11790  
SBYC monitors  
Channel 9



Office  
631-751-9873  
FAX  
631-751-0102

#### **When:**

Saturday Sep. 16th 2017  
Fishing 9am-2pm  
BBQ 1pm-5pm

#### **Where:**

Stony Brook Yacht Club  
21 Shore Rd.  
Stony Brook, NY 11790

#### **Mixed Bag Tournament!**

\$125 Per Boat  
\*Docking at SBYC for weigh-in & BBQ  
\*Admission to BBQ (up to 2 people)  
\***Over \$1,000 in cash prizes for tournament winners!**  
\*Free Parking  
\*9am-2pm

#### **BBQ!**

\$25/adults, \$5/children 12 & under  
\*Includes food, beer, and soda  
\*Face Painting  
\*Capt. Mud's Fish Touch Tank  
\*Raffles/Prizes  
\*1pm-5pm

#### **Captain's Meeting:**

Friday, September 15th  
7:30 PM at Stony Brook Yacht Club  
Stony Brook Yacht Club

For more information contact:  
Susan or Jenny [DSAF03@gmail.com](mailto:DSAF03@gmail.com)  
1-516-983-7008  
[www.dsafonline.org](http://www.dsafonline.org)

## Registration Form:

Please use this form to make your reservation for the September 16, 2017 BBQ & Mixed Bag Fishing Tournament. This form may be dropped off at Stony Brook Yacht Club, mailed to SBYC PO Box 755 Stony Brook, N.Y. 11790 or emailed to [dsaf03@gmail.com](mailto:dsaf03@gmail.com).

Name:

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Company:

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Address (city, state, zip):

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Email:

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### Levels of Participation and Support (Check Desired Levels )

Fishing: \$125/boat (includes 2 passes to BBQ; additional can be purchased below)

BBQ: adults \$25 # \_\_\_\_\_ x \$25 = \$\_\_\_\_\_.

BBQ: children (12 yrs. old and under) \$5. # \_\_\_\_\_ x \$5 = \$\_\_\_\_\_.

I am unable to attend, but wish to contribute a 100% tax deductible donation via mail to SBYC, PO Box 755, Stony Brook, NY 11790 or at <https://gofund.me/28524ujg>

Raffle Prize Donation:

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### Method of Payment (due in full by September 15th):

Total Amount Due: \$

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Enclosed is my check (made payable to the Down Syndrome Advocacy Foundation)

American Express  Discover  MasterCard  Visa

Credit Card number

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Expiration Date:

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Security Code:

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Signature:

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