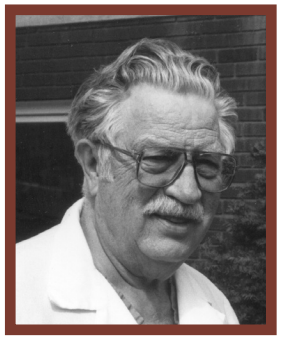

*Dr.* **Harry Propst was dedicated to medicine and the opportunity to serve all who required his surgical skills, without regard to their station in life. To Dr. Propst, each patient was a gift from God. Dr. Propst understood the role of a hospital in the overall health of a rural community, as the place to go for injury and illness, as well as an employer and collaborator with the local education system and local government. Therefore, he volunteered his time and wisdom as Chief of the Medical Staff and a member of the Board of Trustees of Wayne Memorial Hospital for more than 43 years, from 1957 until his death in 2001.**

Our annual Harry D. Propst MD Sporting Clays Invitational supports the highest quality healthcare possible throughout the Wayne Memorial Health System service area, which includes Wayne and Pike Counties, and parts of Lackawanna, Susquehanna, and Luzerne Counties. Under the leadership of our CEO Jim Pettinato, BSN, MHSA, CCRN-K, the guidance of our Board of Trustees, and the needs of our local communities, Wayne Memorial continues to expand services and territory.

Additional specialty and primary care physicians have joined the medical staff and Barnes Kasson Hospital has become an affiliate of Wayne Memorial Health System.

Please consider supporting or continuing to support our efforts by participating, donating, or volunteering at this year's Sporting Clays Invitational.

## DIRECTIONS

**From Wayne Memorial Hospital**
**to Catskill Pheasantry**
**374 Neer Road, Long Eddy NY 12760**
**(845) 887-4487**
**www.catskillpheasantry.com**


**29.3 MILES, 46 MINUTES**

**1. PA-191 N/Fair Ave - 15.8 miles to Lookout**
**2. Turn right onto Braman Rd – 5.5 miles**
**3. Continue onto Cooley Creek Rd - .3 miles**
**4. Slight left onto Kellam Bridge Rd - .6 miles**
**5. Turn left onto NY-97 N – 1.6 miles**
**6. Turn right onto Basket Brook Rd – 1.4 miles**
**7. Turn left onto Neer /Claude Neer Rd – 1 mile**

**DESTINATION REACHED**
**(Parking on the right)**

**VOLUNTEERS NEEDED**
**PLEASE CALL 570-253-8422**

*16th Harry D. Propst, MD*

# SPORTING CLAYS INVITATIONAL

**Saturday, September 19, 2026**
**at**
**Catskill Pheasantry**
**Long Eddy, NY**

## WAYNE MEMORIAL HEALTH FOUNDATION

*An Affiliate of Wayne Memorial Health System, Inc.*

570-253-8100 www.wmh.org

## TOURNAMENT SCHEDULE

**Saturday, September 19, 2026**
**Catskill Pheasantry**
**374 Neer Road, Long Eddy NY 12760**
**(845) 887-4487**

**8:00 - 8:45 am REGISTRATION & Continental Breakfast**

8:45am - Rules of the Day & Shooters Report to Stations

9:15am - Tournament Begins—100 Rounds

100 - 12 or 20 gauge shells provided to each shooter for tournament.

Snacks and beverages served on course. Afternoon luncheon begins immediately following the tournament.

2:00pm - Awards & Gun Raffle Drawing

Catskill Pheasantry rents a limited number of sporting firearms. Entrants must provide own extra shells, eye and ear protection and weather protection. Event is held rain or shine. Visit www.catskillpheasantry.com for information.

*Professional shooters and employees of Catskill Pheasantry are not eligible for prizes.

## SQUAD CAPTAIN

**Name ( )** _____

**Address** _____

**City** _____ **State** _____ **Zip** _____

**Email Address** _____

**Daytime Phone** _____

☐ **Single Entry $150**

☐ **Squad Entry 5 shooters $750**

**Shoot is limited to the first 150 shooters.**

### SPONSORSHIP LEVELS

**Ammunition Sponsor (3) $2,000**
**Company name displayed and announced during awards ceremony, includes 3 shooters.**

**Luncheon Sponsor (1) $1,500**
**Company name displayed and announced during awards ceremony, includes 2 shooters.**

**Course Sponsor (20) $750**
**Company name displayed at shooting station and clubhouse, includes 1 shooter.**

**Company name displayed and announced during awards ceremony for the following sponsorships:**

| | | |
|---|---|---|
| **Breakfast** | **(2)** | **$500** |
| **Raffle Prizes** | **(2)** | **$500** |
| **Trophies** | **(20)** | **$250** |
| **Clays** | **(20)** | **$125** |

## SQUAD MEMBERS

**Please indicate class of shooter:**

**A) Youth boy & girls age 10 thru 17**
**B) Adult woman 18 & older**
**C) Adult men 18 & older**

**1. Name ( )** _____
**Company** _____
**Address** _____
**Phone** _____

**2. Name ( )** _____
**Company** _____
**Address** _____
**Phone** _____

**3. Name ( )** _____
**Company** _____
**Address** _____
**Phone** _____

**4. Name ( )** _____
**Company** _____
**Address** _____
**Phone** _____

**Single entries, please list squad preference:**

_____

_____

**TOTAL AMOUNT DUE**

**$** _____

**Return forms by Friday, September 11.**

**PAY ONLINE at www.wmh.org/sporting-clays-invitational**
**PAY BY CHECK to Wayne Memorial Health Foundation, 601 Park St., Honesdale, PA 18431. Fax sponsorships/registration to 570-253-8993 or email wmhf@wmh.org. Questions? Call 570-253-8422.**