

MEMORIAL DAY GOLF TOURNAMENT

★ MONDAY, MAY 27 ★

LOCATION : TARPON WOODS GOLF CLUB
1100 TARPON WOODS BLVD, PALM HARBOR, FL 34685

Sponsor Name: _____

Contact Name: _____

Individual Golf Registration(s) are \$75, you can use
this form to register 1 or more team members.

By Credit Card Fax to: (727) 849-8001
Total Amount Due: \$ _____
Card Type: Visa / Mastercard / Amex / Discover
Name on Card: _____
Credit Card Number: _____
Expiration Date / CCV: _____ / _____

GOLFER 1 Player Name: _____
Address: _____
City: _____
Zip Code : _____
Tel/Fax: _____
E-mail: _____
Handicap: _____

GOLFER 2 Player Name: _____
Address: _____
City: _____
Zip Code : _____
Tel/Fax: _____
E-mail: _____
Handicap: _____

GOLFER 3 Player Name: _____
Address: _____
City: _____
Zip Code : _____
Tel/Fax: _____
E-mail: _____
Handicap: _____

GOLFER 4 Player Name: _____
Address: _____
City: _____
Zip Code : _____
Tel/Fax: _____
E-mail: _____
Handicap: _____

CALL: (727) 784-7606, FAX (727) 849-8001
OR EMAIL MVANDIVER@TARPONWOODSGC.COM