



THE ARMED FORCES MILITARY MUSEUM

Thursday, March 11, 2010

Golf Tournament Registration Form

Check in Begins at 11am

Check if registering as single player

Player 1 Name: **Date**

Address: **City:** **State:** **Zip:**

Eve Phone: **Day Phone:**

Email: @

Handicap **Unknown Handicap**

I plan on staying for awards and dinner **Yes** **No**

Player 2 Name: **Date**

Address: **City:** **State:** **Zip:**

Eve Phone: **Day Phone:**

Email: @

Handicap **Unknown Handicap**

I plan on staying for awards and dinner **Yes** **No**

Player 3 Name: **Date**

Address: **City:** **State:** **Zip:**

Eve Phone: **Day Phone:**

Email: @

Handicap **Unknown Handicap**

I plan on staying for awards and dinner **Yes** **No**

Player 4 Name: **Date**

Address: **City:** **State:** **Zip:**

Eve Phone: **Day Phone:**

Email: @

Handicap **Unknown Handicap**

I plan on staying for awards and dinner **Yes** **No**

Payment enclosed for:

\$ **\$100- Individual Registration**

\$ **\$400- 4 person Team Registration**

\$ **Total. Enclosed is my:** **Check** **Money Order** **Credit Card**

Credit Card # **Exp. Date** **Am Ex** **Visa** **MasterCard**

Signature **Date**

Make all funds payable to: The Armed Forces Military Museum with notation "Golf Tourn"

**Fax this form to: 727-524-4967- The Armed Forces Military Museum, Attn: Nadine Piazza
or mail to: 2750 34th Way North, Largo, FL 33771, Attn: Nadine Piazza**

For more information please contact Nadine Piazza 727-539-8371 ext. 104 or nadine@armedforcesmuseum.com

www.armedforcesmuseum.com

All Entries are Non-Refundable