

AAMA SOUTHEAST REGION 2009 FALL MEETING GOLF TOURNAMENT REGISTRATION FORM

Wednesday, August 12, 2009

Heron Bay Golf Club
11801 Heron Bay Blvd.
Coral Springs, FL 33076
Phone: (954) 796-2011

Tee off at 7:30 a.m.

Tournament Fee: \$86

includes greens fee, 1/2 cart, range balls, tournament fee, taxes, prizes, and gratuities.

Club Rental Fee: \$38

Please check one: _____ right-hand _____ left-hand

Please add club rental fee indicated above to Tournament Fee of \$ – check or credit card (see below).

My Handicap is _____

Please pair me with: _____

**GOLF COURSE IS LOCATED NEXT TO THE MARRIOTT
(WALKING DISTANCE).**

Please note that there are no refunds for golf cancellations.

Please register me for the Golf Tournament.

Name _____

Company _____

Address _____

City, State, Zip _____

Phone _____ Fax _____ E-mail _____

My check for \$ _____ is enclosed. (office use: check # _____)

Please apply fee of \$ _____ to my credit card. (office use: auth. code _____)

VISA

MasterCard

American Express

Discover

Account # _____ Exp. Date _____

**Mail or FAX form to: Kaydeen Laird, AAMA, 1827 Walden Office Sq., Ste.550, Schaumburg, IL 60173
FAX (847) 303-5774**