

TOURNAMENT ENTRY FORM

(501 (c)(3) nonprofit corporation; Donation is tax deductible to the full extent of the law; Tax I.D. #41-2040289)

1. Name _____ Email Address _____

Home Address _____

Handicap Number _____ Phone _____

Will attend dinner on Sunday -- March 2, 2008

2. Name _____ Email Address _____

Home Address _____

Handicap Number _____ Phone _____

Will attend dinner on Sunday -- March 2, 2008

3. Name _____ Email Address _____

Home Address _____

Handicap Number _____ Phone _____

Will attend dinner on Sunday -- March 2, 2008

4. Name _____ Email Address _____

Home Address _____

Handicap Number _____ Phone _____

Will attend dinner on Sunday -- March 2, 2008

Contact _____ Phone _____

Home Address _____

Name of Pro _____

Indicate if you need Pro assigned to team.

Entry fee is \$275 (tax deductible) per player.

Please mail this form and your check made out to WSCGA Foundation Pro-Am to the address below.

Entry forms must be received by Monday – February 11, 2008.

Entries entered in order of receipt.

METHOD OF PAYMENT

Fax Application to (909) 592-7542

Check

CREDIT CARDS: Master Card Visa American Express Exp. Date: _____ Card # _____

Name _____

Address _____

Telephone # _____ Email Address _____

Signature _____

Make checks payable and return to:

WSCGA Foundation-Pro-Am, 402 West Arrow Hwy., #10, San Dimas, CA 91773

For More Information/Questions:

Trish Lange @ (310) 541-3891; langedt@cox.net;

Nancy Young @ nancyayoung@cox.net;

WSCGA Office: (909) 592-1281, ext. 306