



Individual/Foursome Registration Form

REGISTRATION FEES: Single Player – \$300 | Foursome – \$1,200

NAME _____

COMPANY NAME _____

ADDRESS _____

CITY/STATE/ZIP _____

PHONE _____ EMAIL _____

PAYMENT IS REQUIRED FOR ALL PLAYERS AT THE TIME OF REGISTRATION

Register a single player – up to a full foursome! Simply provide the names of your preferred playing partners below. If partners have yet to be confirmed, enter your name as Player #1 then indicate the number of players that you wish to secure space for in the payment information box below. IPAA is not able to reserve space for requested partners unless full payment is received at the time of registration.

PLAYER NAME	COMPANY	EMAIL	HANDICAP	NEED CLUBS? (IF YES, L/R?)
1.				
2.				
3.				
4.				

*Rental Clubs will be requested on your behalf but payment still remains the responsibility of the individual.

Payment Information

OF PLAYERS _____ x \$300 = \$ _____

CREDIT CARD: VISA MASTERCARD AMEX

CREDIT CARD # _____

EXP. DATE _____

CARDHOLDER _____

SIGNATURE _____

Submit Form and Payment to:

Please fill out this form and fax or email to Keely Daugherty by **noon on Thursday, March 15th.**

FAX | 202-293-0681
EMAIL | kdaugherty@ipaa.org

Questions? Call Keely at 202-857-4734

Full Payment Must Accompany This Form