



BOMA South Puget Sound
2015 Golf Classic
Friday, July 24th
Golfer Registration Form



Whispering Firs Golf Course - 895 Lincoln Blvd, McChord AFB, WA 98438
Golfer Check-In 11:00AM - Shotgun Start 1:00PM / Awards Dinner 5:30PM – 8:00PM

Golf & Dinner Registration (subject to confirmation)		
Name	Company	Flight (beginner, intermediate, or advanced)
1.		
2.		
3.		
4.		

Come play a round of golf and then join us in the clubhouse for our dinner and annual get together.
There will be gifts, contests and plenty of fun for everyone!

EXTRA Dinners Only Registration	
Name	Company
1.	
2.	

Contact Person	
Provide the person responsible for changes, cancellations and dissemination of information to registered golfers.	
Name: _____	Company: _____
Phone: () _____	Fax: () _____
E-Mail: _____	

Enclosed fees:

Golf (includes dinner) \$125.00 per person \$ _____
(Dinner provided by BOMA SPS for golfers, members and their spouses only, others \$30)

Total \$ _____

Payment Options:

____ Check enclosed for payment in full payable to:

“BOMA South Puget Sound” 5727 Baker Way NW Suite 200 Gig Harbor, WA 98332

____ Send invoice to above name and address.

____ Bill my Visa/MasterCard #: _____ Expiration: _____

Name as it appears on card: _____ CV#: _____

Signature(s): _____ Date: _____

To reserve your Golfers send completed registration form via:

E-mail: Jaimee Lombino jaimee@aminc.org or Fax# 253.265.3043

All golfer names are needed by the July 3rd deadline. Cancellation deadline is July 3rd. No refunds or credits after 7/3/15.

Please send in your payment with this form to reserve your place. No reservations will be accepted without payment.



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TO BE COMPLETED FOR SECURITY PURPOSES

*Last Name	*First Name	*Middle Name	*DOB	*SSN Last Four	*DL #	*DL State	*Visit Duration

***REQUIRED**