

# KMCA 2018 GOLF REGISTRATION

SEPTEMBER 25, 2018    SALINA MUNICIPAL GOLF COURSE    2500 EAST CRAWFORD    SALINA, KS

The golf tournament will be held at Salina Municipal Golf Course in Salina, KS. The entry fee is \$99 per person or \$396 per foursome. Golf begins at 8:15 a.m. Pricing includes a round of golf with a shot gun start, golf cart, lunch, beverage cart, and opportunity for prizes. If you would like to be paired with a specific player other than those listed on your registration, please indicate on this form.

## REGISTRATION (PLEASE PRINT)

Full Name: \_\_\_\_\_ Company Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Email Address: \_\_\_\_\_

Full Name: \_\_\_\_\_ Company Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Email Address: \_\_\_\_\_

Full Name: \_\_\_\_\_ Company Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Email Address: \_\_\_\_\_

Full Name: \_\_\_\_\_ Company Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Email Address: \_\_\_\_\_

**Please pair me with:** \_\_\_\_\_

## PAYMENT INFORMATION – PAYMENT MUST ACCOMPANY REGISTRATION

**(Select One)**

Enclosed is a check payable to KMCA                       I authorize the charge to my credit card I have specified

Visa             MasterCard             American Express             Discover

Credit Card Number: \_\_\_\_\_ Expiration Date: \_\_\_\_\_

Name on card: \_\_\_\_\_ 3-Digit Code: \_\_\_\_\_

Email for receipt: \_\_\_\_\_

Return form to: KMCA, PO Box 1673, Topeka, KS 66601    Phone: (785)267-1641 Fax: (785)266-6551