

14th Annual Open WFFC Golf Outing

May 21, 2008

PLEASE PRINT CLEARLY

NOTE: If less than four registrants you will be assigned to foursome. Include approximate average in order to be assigned with equal players. If registering more than one foursome please use an additional form.

If any registrant is paying for their own fee separately please indicate by checking box to left of name.

GOLFER REGISTRATION - (INCLUDES LUNCH, COCKTAILS AND DINNER) - \$245 PER PERSON		
NAME	COMPANY	FEE
<input type="checkbox"/> _____	_____	\$245
<input type="checkbox"/> _____	_____	\$245
<input type="checkbox"/> _____	_____	\$245
<input type="checkbox"/> _____	_____	\$245
INDIVIDUAL GOLFER REGISTRATION (FEWER THAN A FOURSOME)		
NAME	Golf Average	COMPANY
<input type="checkbox"/> _____	_____	\$245
<input type="checkbox"/> _____	_____	\$245
<input type="checkbox"/> _____	_____	\$245
I am requesting to play golf with:		
NAME	COMPANY	
_____	_____	
_____	_____	
Sub Total Golf Registration		\$ _____

"COCKTAILS AND DINNER ONLY" REGISTRATION - (NO GOLFING) - \$95		
NAME	COMPANY	FEE
<input type="checkbox"/> _____	_____	\$95
<input type="checkbox"/> _____	_____	\$95
<input type="checkbox"/> _____	_____	\$95
<input type="checkbox"/> _____	_____	\$95
Sub Total "Cocktails and Dinner Only" Registration		\$ _____
GRAND TOTAL ENCLOSED		\$ _____

Bill to: Name _____
 Company Name _____
 Address _____
 City, State, Zip _____
 Phone: _____
 E-Mail: _____

Credit Card Payment Options:

- VISA MASTER CARD AMERICAN EXPRESS

NAME ON CREDIT CARD: _____ **AMT. TO CHARGE:** _____
CREDIT CARD NUMBER: _____ **EXP DATE:** _____
BILLING ADDRESS OF CARDHOLDER: _____ **ZIP:** _____

Or make checks payable to WFFC and mail to:
 WFFC, 3301 Route 66, Suite 205, Building C, Neptune, NJ 07753
[Info: info@wffc.org](mailto:info@wffc.org) / Tel: 732-922-0500/ Fax: 732-922-0560