

# Tournament Registration

2017 Annual Charity Golf Classic  
November 2, 2017



400 Avenue of the Champions  
Palm Beach Gardens, FL 33418



Send completed form to Jeff Ramsden: [jr@ramjetaviation.com](mailto:jr@ramjetaviation.com) or via fax: 954-359-0209.  
If paying by check, please include a copy of this registration form with your check.

*Sponsorship Opportunities are Available, please contact Jeff Ramsden (954-359-0208) for more information.*

## Golfer Information

## Shirt Size

Name:	<input type="text"/>
Name (2):	<input type="text"/>
Name (3):	<input type="text"/>
Name (4):	<input type="text"/>
Company:	<input type="text"/>
Address:	<input type="text"/>
City, State:	<input type="text"/>
Zip Code:	<input type="text"/>

<input type="text"/>
<input type="text"/>
<input type="text"/>
<input type="text"/>

Main Contact:	<input type="text"/>
Email:	<input type="text"/>
Phone:	<input type="text"/>

Special Requests:

## Registration Fees

Registration Type:	<input type="text"/>
x Number of Type:	<input type="text"/>
Total:	<input type="text"/>

*Payments Must be Received by October 5, 2017*

## Payment

- Sent Check (make payable to: SFBAA)
- Credit Card
  - American Express
  - Mastercard
  - Visa

Card Number:	<input type="text"/>
Expiration Date:	<input type="text"/>
CVV Code:	<input type="text"/>
Cardholder Name:	<input type="text"/>

## Billing Address

Address:	<input type="text"/>
City, State:	<input type="text"/>
Zip Code:	<input type="text"/>
Phone:	<input type="text"/>