

HSF Golf Tour 2009

Team Registration Form – The “Classic” at Las Campanas Las Campanas Golf Club – August 25, 2009

Company/Team Name: _____

Address: _____ Day Phone: _____

City: _____ State: _____ ZIP: _____ E-mail _____

Player List:

Player #1: _____ Handicap: _____ Shirt Size: _____

Company: _____ Day Phone: _____

Address: _____ Fax _____

City: _____ State: _____ ZIP: _____ E-mail: _____

Player #2: _____ Handicap: _____ Shirt Size: _____

Company: _____ Day Phone: _____

Address: _____ Fax _____

City: _____ State: _____ ZIP: _____ E-mail: _____

Player #3: _____ Handicap: _____ Shirt Size: _____

Company: _____ Day Phone: _____

Address: _____ Fax _____

City: _____ State: _____ ZIP: _____ E-mail: _____

Player #4: _____ Handicap: _____ Shirt Size: _____

Company: _____ Day Phone: _____

Address: _____ Fax _____

City: _____ State: _____ ZIP: _____ E-mail: _____

ADDITIONAL INFORMATION:

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