

Golf Tournament Registration Form
Proceeds to Benefit The Masury Ballroom Restoration Fund
September 20, 2019 – Rock Hill Golf and Country Club

Contact Info: (Please Print or Type)

Last Name _____ First Name _____

Address _____

City _____ State _____ Zip Code _____

Telephone _____ Email _____

- Individual Golf Registration \$160
- Foursome Golf Registration \$600 (\$640 if paid after 7/15/19)

Method of Payment

- Enclosed is a check made payable to **Masury Ballroom Restoration Fund**
- I wish to pay my fees by credit card

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Expiration Date _____ CVC# _____

Name _____

Authorizing Signature _____

Total Amount Authorized \$ _____

Return This Completed Form With Payment
Rudy Rank
PO Box 299, Center Moriches, NY 11934

If you have a team but are not registering together please let us know with whom you will be golfing. Individuals will be placed with other golfers to create teams of four.