THE NATIONAL FATHER & SON TEAM CLASSIC
2012 REGISTRATION FORM

There are three ways to register for the tournament.

1. REGISTER SECURELY ONLINE at www.fathersongolf.com (or)
2. Mail the completed registration form to the address below. (or)
3. Fax the completed registration form to (843) 449-5624.

Do not send duplicate registration forms. Choose one of the methods above to register.

(Please print clearly)

We must have at least one valid email address to complete your registration.

FATHER

NAME: :_____ AGE: _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIP CODE: _____

TELEPHONE: _____ EMAIL: _____

CLUB AFFILIATION : _____TELEPHONE: _____

SHIRT SIZE: S M L XL XXL XXXL GHIN #: _____ *(If available)*

USGA HDCP: _____ (*Handicap Verification Form Must be Completed by 6/15/2012)*

SON

NAME: :_____ AGE: _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIP CODE: _____

TELEPHONE: _____ EMAIL: _____

CLUB AFFILIATION : _____TELEPHONE: _____

SHIRT SIZE: S M L XL XXL XXXL GHIN #: _____ *(If available)*

USGA HDCP: _____ (*Handicap Verification Form Must be Completed by 6/15/2012)*

THIS WILL BE OUR _____ YEAR TO PLAY IN THE EVENT.

Check appropriate box: ☐ *$1175 Per New Team* ☐ *$950 Returning Teams*

Send completed form and make checks payable to:

Father & Son Team Classic, PO Box 50742, Myrtle Beach SC 29579

or FAX to: (843) 449-5624

☐ Visa ☐ MC ☐ AMEX ☐ DISCOVER Exp. Date _____

Cardholder Name:_____