

REGISTRATION FORM

GRANDE DUNES CLASSIC

AUGUST 22-23, 2010

PGA PROFESSIONAL REGISTRATION

PRO - CELEBRITY _____

ADDRESS _____

CITY _____ STATE _____ ZIP _____

PHONE _____ HCP _____ SHIRT SIZE _____

EMAIL _____ SHOE SIZE _____

FAMILY MEMBERS ATTENDING

Name Relation

Name Relation

Name Relation

Name Relation

PLEASE CHECK YOUR COMMITMENT:



Yes, I will attend

No, I will not attend

I have included my
bio for the program

I will send my bio
for the program

ARRIVAL DATE: _____ DEPARTURE DATE: _____

NUMBER OF ROOMS: _____

**One room night included in invitation
Call for preferred rate for additional nights**

Send completed form to:
Members Club/Make-a-Wish, 1580 Terra Verde Drive, Myrtle Beach, SC 29579 FAX (843) 315-0330
Attention: Make-A-Wish

For more information please call the Members Club at Grande Dunes (843) 913-1346 or email:
Mike.Buccerone@bccompany.com