



2009 Florida Golf Getaways Registration Form

Check preferred date: ___ Mar. 12-14; ___ Mar. 15-17; ___ Mar. 22-24; ___ Mar.29-31

Second Choice (fill in) _____

Name _____

Address _____

City/State/Zip _____

Daytime Phone # _____

Cell Phone # _____

E-mail address _____

Others in your group _____

Avg. 9 or 18 hole score _____

To reserve your space, please email this form to adrienne@golfingwomen.com or fax it to 631-614-4343, and send a deposit check for \$250 to Sports Journeys, Inc., 2 Wildwood Court, E. Hampton, NY 11937. The balance is due (via check) one month prior to the first day of your Getaway. No refunds will be made once full payment is received. Deposits (minus a \$50 fee) will be refunded if requested by Feb. 1, 2009, or any time (minus a \$50 fee) if you provide a replacement.

Terms: I have read the payment terms and agree to abide them. Additionally, I understand that there are certain risks associated with all athletic activities, and I agree to assume all such risks as they may relate to me, and I further release Sports Journeys, Inc., and all their representatives as well as any golf facilities we use from any claim or liability which I or any of my successors or assigns may have arising in any way out of my participation in the golf getaway, including travel to and from any site of any activity associated with the getaway.

Name

Signature

Date

Fax this form to 631-614-4343