



®™

### 2007 EVENT APPLICATION

(Print this page and fill in the blanks. Please print or type in the information)

Name: \_\_\_\_\_ SS# \_\_\_\_\_ DOB: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Email Address: \_\_\_\_\_

Emergency Contact Person: \_\_\_\_\_

Club Affiliation: \_\_\_\_\_ Phone #: \_\_\_\_\_

Please enter me in the following Event(s):

Event Dates: \_\_\_\_\_ Course \_\_\_\_\_

Event Dates: \_\_\_\_\_ Course \_\_\_\_\_

Event Dates: \_\_\_\_\_ Course \_\_\_\_\_

Check here to pay for Series: Winter Series: \$ 3,350 Spring/Summer Series: \$ 4800 Fall Series: \$ 3800

*Circle Series : (Includes all events in the Series plus Membership Fee for 2007 season.)*

Check here to pay for 2007 Season: \$ 10,950. *(Includes all 2007 events plus Membership Fee for 2007 season.)*

Amount Enclosed: \$ \_\_\_\_\_ Check # \_\_\_\_\_

PLEASE MAIL ENTRY AND PAYMENT TO:

(Personal Check, Money Order, Cashiers Check)

*(Note: If you send M/O or Cashier Check, make sure that you ask the carrier to have our tour office sign for these funds when received)*

Grand Strand Pro Golf Tour  
314-A Laurel St Suite #200  
Conway, SC 29526

Tel: 843-488-9205

E-mail: [GSPGT@sc.rr.com](mailto:GSPGT@sc.rr.com)

By submitting this application and payment, you will be entered into the event that you have indicated on this form in the order that your application is received. Applications must be received by the tour office no later than 5:00 PM on Monday prior to any event that you are entering. ***The tour is not responsible for US Postal service delivery. If the form is not received in our office before the deadline, you will NOT be entered into the event for that week.***

(Signature) \_\_\_\_\_ (Date) \_\_\_\_\_