

# GMA SHRM Golf Outing Registration Form

Tuesday, August 2, 2011  
The Oaks, Cottage Grove

Date: Tuesday, August 2, 2011  
Location: The Oaks – Cottage Grove, WI  
Schedule: Registration and Practice 7:30 to 8:45  
Players to Carts 8:45  
Shotgun Start 9:00  
Reception 1:00 or immediately following play, whichever comes first.

Registration: \$89\* per player for GMA SHRM Members.  
\$99\* per player for non-members.  
\$25 per person for Reception Only  
\* Includes 18 holes of golf with cart, practice range use, chance to qualify for the \$1,000 putt, continental breakfast, lunch, reception and prizes.

|   |   |
|---|---|
| 1. Your information   |   |
| Name _____  | Company _____                                       |
| Address _____   | City/State/ Zip _____                               |
| Telephone _____   | Email _____   |
| 2. Player ability   |   |
| So we can ensure all players have a great day on the course, please tell us how often you play:           |   |
| ___ First time    ___ 2-5 times a year    ___ 5-10 times a year    ___ The course record is mine!         |   |
| 3. Pairing requests ( Best efforts will be made to accommodate pairing requests.)                         |   |
| ___ Sign me up and put me with a fun group!   |   |
| ___ I request to be in the same group as _____.   |   |
| ___ I would like to be grouped with the people <b>I am paying for</b> below. (Maximum 4 people per group) |   |
| 4. Amount due   |   |
| Member golf _____ x \$89 = \$ _____   | Name of player 2: _____<br>If applicable            |
| Non member golf _____ x \$99 = \$ _____   | Name of Player 3: _____<br>If applicable            |
| Reception only _____ x \$25 = \$ _____  | Name of Player 4: _____<br>If applicable            |
| _____   |   |
| Total _____ = \$ _____  |   |
| 5. Payment (payment must accompany all registrations)   |   |
| Payment Method: credit card or check _____  | Credit Card Number & Exp Date (if applicable) _____ |

If paying by credit card, return by email to [chapteradmin@gmashrm.org](mailto:chapteradmin@gmashrm.org), by fax to 608-204-9818 or call 608-204-9814.

Refunds are not available for cancellations made after Friday, July 22<sup>nd</sup>.

If paying by check, please mail a copy of this form and payment to: GMA SHRM, 2830 Agriculture Dr., Madison, WI 53718