

**2011**

South Australian  
GOLF INDUSTRY  
AWARDS NIGHT



# Booking Form

Name: \_\_\_\_\_ Club: \_\_\_\_\_

Postal Address: \_\_\_\_\_ Suburb: \_\_\_\_\_ Post Code: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

## GUEST DETAILS

1. \_\_\_\_\_ 2. \_\_\_\_\_  
3. \_\_\_\_\_ 4. \_\_\_\_\_  
5. \_\_\_\_\_ 6. \_\_\_\_\_  
7. \_\_\_\_\_ 8. \_\_\_\_\_

Please indicate if you wish to be seated with a specific group & we will do our best to accommodate:

\_\_\_\_\_

Please indicate any Special Dietary Requirements:

\_\_\_\_\_

## PAYMENT DETAILS

No. of Guests	Price	Total Cost
	\$110 each	

*(tick selected option)*

Payment:  Cheque  Mastercard  Visa  Direct Deposit (BSB: 105 074 / ACC: 044837440)

Card Number: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ Expiry Date: \_\_\_\_ / \_\_\_\_

Cardholder's Name: \_\_\_\_\_ Amount: \$ \_\_\_\_\_

Cardholder's Signature: \_\_\_\_\_

**PLEASE RETURN BOOKING FORM TO GOLF SA BY FRIDAY 7 OCTOBER 2011 to reserve your tickets**

**Golf SA – Fax:** 08 8352 3900 **Email:** [admin@golfsa.com.au](mailto:admin@golfsa.com.au)

**Mail:** Golf SA, PO Box 356, Torrensville Plaza, SA, 5031