



NAILBA 28

17th ANNUAL NAILBA GOLF TOURNAMENT REGISTRATION FORM



Time: First ball must fly at 12:00 p.m.
Buses will depart the hotel at 11:20 a.m.

Please note:

- Only those registered for NAILBA 28 are eligible to play.
- You can only sign up fellow golfers if you are paying for their golf registration.
- You must check in at golf registration; this is where you pick up your golf "goodies". Golf Registration opens at 8:00 a.m. on Thursday, November 12; it will be located near the Annual Meeting Registration Desk.

(please circle one) Championship Flight or Fun Flight

Player #1 Name: _____

Agency/Company Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Email: _____

Handicap: _____ Shirt or Jacket Size: _____

Please Reserve Rental Clubs: Men's Women's Right Left
(Rental clubs must be paid for by players at the Pro Shop; they are NOT included in the Golf Registration Fee.)

Player #3 Name: _____

Agency/Company Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Email: _____

Handicap: _____ Shirt or Jacket Size: _____

Please Reserve Rental Clubs: Men's Women's Right Left
(Rental clubs must be paid for by players at the Pro Shop; they are NOT included in the Golf Registration Fee.)

Player #2 Name: _____

Agency/Company Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Email: _____

Handicap: _____ Shirt or Jacket Size: _____

Please Reserve Rental Clubs: Men's Women's Right Left
(Rental clubs must be paid for by players at the Pro Shop; they are NOT included in the Golf Registration Fee.)

Player #4 Name: _____

Agency/Company Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Email: _____

Handicap: _____ Shirt or Jacket Size: _____

Please Reserve Rental Clubs: Men's Women's Right Left
(Rental clubs must be paid for by players at the Pro Shop; they are NOT included in the Golf Registration Fee.)

of Players listed above _____ @ \$199 each

Total Due: \$ _____

Pay by credit card: Visa MasterCard Amex

Credit Card #: _____ Expiration Date: _____

Name on Card: _____

Signature: _____

Pay by Check: (check is enclosed)

Amount \$ _____ Check # _____

Register online at www.nailba.org OR

Fax this completed form (with credit card information) to (703) 383-6942 OR mail this completed form (with your check) to: NAILBA Golf, 11325 Random Hills Road, Suite 110, Fairfax, VA 22030