



6TH ANNUAL GOLF TOURNAMENT

Tuesday, March 12, 2013

Rosen Shingle Creek Golf Club | Orlando, Florida | 1pm Shotgun Start

NISTM SPONSORSHIP OPPORTUNITIES

Please check your Sponsorship Option:

SOLD Golf Tournament Title Sponsor



SOLD Hole-in-One Sponsor



MATRIX SERVICE

Beverage Cart Sponsor
\$650 each (2 available)



Chipping Championship
Sponsor
\$500 (1 available)

Longest Drive Sponsor
\$375 each (2 available)

SOLD Closest to the Pin



Hole Sponsor
\$150 each (3 available)

**FAX COMPLETED REGISTRATION FORM
to 813.870.6824
or Email to: janelle@nistm.org**

Cancellation & Refund Policy:

All cancellations must be in writing. They may be faxed to 813.870.6824 or emailed to janelle@nistm.org. A full refund, less \$50 per person processing fee, will be paid for cancellation requests received on or before March 1, 2013. Refunds will not be paid after that date.

Registrations are transferrable. Player substitution requests must be in writing. They must be emailed to janelle@nistm.org on or before March 1, 2013, in order to be listed on the official players' roster.

REGISTER TO ENSURE YOUR SPOT!

*The tournament will be held
rain or shine.*

GOLF REGISTRATION FORM

Name: _____

Company: _____

Address: _____

City: _____ ST: _____ Zip: _____

Phone: _____ Email: _____

FOURSOME INFORMATION:

Foursome \$650.00 per foursome X _____ = \$ _____

Individual \$162.50 per golfer X _____ = \$ _____

☐ Golf Club
Rentals are
available at
the Pro Shop
_____ QTY

1. Name: _____

Company: _____

Email Address: _____

2. Name: _____

Company: _____

Email Address: _____

3. Name: _____

Company: _____

Email Address: _____

4. Name: _____

Company: _____

Email Address: _____

PAYMENT INFORMATION:

_____ **Check in Mail** (Payable to NISTM) Mail check to: PO Box 26008, Tampa, FL 33623

_____ **American Express** _____ **Discover** _____ **MasterCard** _____ **VISA**

Credit Card # _____ Exp. Date: _____

CVV # _____ Billing Address # _____ Billing Zip _____

Name on Card: _____

Signature: _____ Date: _____

To submit this registration form, you may either Fax it to **813.870.6824** or
Scan/Email it to janelle@nistm.org