



NISTM 3RD ANNUAL GOLF TOURNAMENT

Tuesday, September 12, 2017

Moody Gardens Golf Course | Galveston, Texas | Shotgun Start: 9:00am

NISTM SPONSORSHIP OPPORTUNITIES

Please check your Sponsorship Option:

- Golf Tournament Title Sponsor**
\$3000 (1 available)
- Hole-in-One Sponsor**
\$1,000 (1 available)
- Beverage Cart Sponsor**
\$650 each (3 available)
- Longest Drive Sponsor**
\$375 each (2 available)
- Closest to the Pin**
\$375 each (2 available)
- Hole Sponsor**
\$150 each (18 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 August 25, 2017. 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 August 25, 2017, in order to be listed on the official players' roster.

**REGISTER BY SEPTEMBER 5, 2017
TO ENSURE YOUR SPOT!**

*The tournament will be held
rain or shine.
If weather cancels play, there will be no
refunds; rain checks will be issued.*

GOLF REGISTRATION FORM

Name: _____

Company: _____

Address: _____

City: _____ ST: _____ Zip: _____

Phone: _____ Email: _____

FOURSOME INFORMATION:

Foursome \$650.00 per foursome = \$ _____

Individual \$162.50 per golfer = \$ _____

Golf Club Rentals
are available at
the Pro Shop

1. Name: _____ Golf Club Rental

Company: _____

Full Address: _____

Email Address: _____

2. Name: _____ Golf Club Rental

Company: _____

Full Address: _____

Email Address: _____

3. Name: _____ Golf Club Rental

Company: _____

Full Address: _____

Email Address: _____

4. Name: _____ Golf Club Rental

Company: _____

Full Address: _____

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

GOLF COURSE LOCATION:

Moody Gardens Golf Course, 1700 Sydnor Lane, Galveston, TX 77554