

Benefit Golf Classic

Monday, October 13th, 2014

Crosswinds Golf Club

11am Registration/12:30pm Shotgun

Entry Form due by 6:00pm Wednesday, October 8th, 2014

Tournament Format: 4-person Scramble

Player's Names:

1.	 Contact #:
2.	 Contact #:
3.	 Contact #:
4.	 Contact #:

Entry Fee: \$75/player or \$300/team

Team Name:

Contact Name and Email:

Payment:

\bigcirc Seaport Open Sponsor Complimentary Team			
O Check Enclosed (please make payable to The Seaport Open and is due by 6:00pm Wednesday, October 8th, 2014)			
Credit Card Payment 🔿 Visa 🔿 MasterCard 🔿 AMEX	⊖ Discover		
Card #	Exp. Date		
Name on Card Signature	-		

Please email, fax or mail this form to: Crosswinds Golf Club Attn: Seaport Open 232 James B Blackburn Drive Savannah, GA 31408 Call 912.966.1909 to place Credit Card Order by phone (912) 966-1015 fax