



Bahamas Hotel Association

11th Annual Golf Tournament

Sunday, October 4, 2009

Cable Beach Golf Course

Check-in Time: 7:15 a.m.; Tee-Off Time: 7:45 a.m.

TEAM REGISTRATION FORM

TOURNAMENT FORMAT: TWO-MAN SCRAMBLE

PLAYER 1	PLAYER 2
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NAME: _____

NAME: _____

COMPANY: _____

COMPANY: _____

TELEPHONE: _____

TELEPHONE: _____

CELL: _____

CELL: _____

EMAIL: _____

EMAIL: _____

HANDICAP (If BGF use updated number please): _____

(Max. 24 men; 28 ladies)

HANDICAP (If BGF use updated number please): _____

Registration Deadline: *Friday, September 25th, 2009*

Online registration Information should be sent to: bha@bahamashotels.org

[] Golf & Lunch # of Guests [] @ \$125.00 each \$ _____

[] Lunch Only # of Guests [] @\$20.00 each \$ _____

AMOUNT ENCLOSED \$ _____

*** Payment Must be Made in Advance to guarantee space

*** Cheque must accompany registration form

*** Please make cheque payable to: Bahamas Hotel Association

For Additional Information Contact:

Dominique Duncanson or Wendy Wong;

S. G. Hambros Bldg – West Bay Street (southern entrance)

Tel: (242) 322- 8381- 4

Fax: (242) 502-4220