

CALLAWAY GOLF

HI-LITE PRO-AM 2008

2nd – 5th October, 2008
In Association with Golf China

REGISTRATION FORM

Player 1

Name: _____ Company _____

Address: _____

Email: _____

Tel (bus) _____ Fax (bus) _____ Mob _____

Golf Club: _____ Handicap: _____ Shirt Size: _____

Check-in Date: _____ Check-out Date: _____

King Room Twin Room Name of non-playing partner: _____

Player 2

Name: _____ Company _____

Address: _____

Email: _____

Tel (bus) _____ Fax (bus) _____ Mob _____

Golf Club: _____ Handicap: _____ Shirt Size: _____

Check-in Date: _____ Check-out Date: _____

King Room Twin Room Name of non-playing partner: _____

Player 3

Name: _____ Company _____

Address: _____

Email: _____

Tel (bus) _____ Fax (bus) _____ Mob _____

Golf Club: _____ Handicap: _____ Shirt Size: _____

Check-in Date: _____ Check-out Date: _____

King Room Twin Room Name of non-playing partner: _____

IMPORTANT: Please return this form by fax ASAP to: (07) 3219 6833

If you have any queries, please contact John Ryan on 0412 120 116 or Kylie Hadcroft on 0421 978 126.



Hi-LiteEvents

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