

# EVENTS-INFO.COM REGISTRATION FORM

**Event Name:**

**Event Sponsor (Company, Organization, Group, Person, etc.):**

**Event**     **Golf**

**Type:**    **Other:** \_\_\_\_\_

**Event Date:**

**Event Registration Time:**

**Event Tee-Off or Start Time:**

**Event Site Name (Golf Course, etc.):**

**Event Site Address:**

**Event Site City:**

**Event Site State:**

**Event Site Zip:**

**Event Site Telephone:**

**\*\* Contact Information Listed on the Web Page \*\* Suggest use of P.O. Box, Business, or Organization  
Do not use Personal Contact Information      Address & Telephone Number & Email Address**

**Event Contact Person or Organization Name:**

**E-Mail Address:**

**Address:**

**City:**

**State:**

**Zip:**

**Telephone:**

**\*\* Contact Information Not Listed on the WebPage \*\* Contact Information for EVENTSINFO.COM**

**Event Coordinator/Contact Person:**

**Event Coordinator/Contact Person E-Mail Address:**

**Address:**

**City:**

**State:**

**Zip:**

**Telephone:**

**Comments / Additional Information Regarding Your Event: Attach a separate document**

**Event Coordinator/Contact Person Signature:**

**Submit Check or Money Order in the amount of \$80.00 - Payable to Madrid Associates.**

**Mail your Check or Money Order & Completed Registration Form**

**To: Madrid Associates**

**19785 West 12 Mile Road. #862**

**Southfield, MI 48076**

**Contact us: (313) 345-9747**